(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED/EFFECTIVE

01/10/127 (3) 8:42

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

The assumed busine business is:		gned use(s) in the transaction of
	Murtaugh Ma	1chine Shop
business under the as Name Brad or Et	d <u>business</u> address(es) of the ssumed business name:	Complete Address BAIG N 4425 E Murtaugh 10 82344
Retail Trade Wholesale Trade Services Manufacturing	Transportation and	he assumed business name is: Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and addresorrespondence should be read the read that the rea		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address to copy is (if other than # 4 at P	for this acknowledgment bove): YKING	Phone number (optional):
PO Box Twin Falls	29	Secretary of State use only
Signature: BRAD	Perkins Perkins	
Printed Name: Brack	Perkins my	IDAHO SECRETARY OF STATE 11/27/2001 05:00
Capacity: OWNEV	Complian	CK: 955622 CT: 24885 BH: 431469 1 8 29.88 = 20.88 ASSUM MANE # 2

D 50 115