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CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. Please type or print legibly. NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: HOPKINS HANDYMAN STAVE	
 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Kristoffer B. Hopkins Jennafer R. Hopkins Joi Se. Mano 3. The general type of business transacted under the assumed business name is: 	
 3. The general type of business transacted under the a Retail Trade Wholesale Trade Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Hopkins Hunduman Su. 349.5. Motecan Way Disc. 10, 83109 	
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional): $308(949)4055$
Signature: AMA Hopf Printed Name: AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Secretary of State use only IDAHO SECRETARY OF STATE Ø 3/06/2007 Ø 5 ±00 CK: 4728 I 8 25.68 = 25.68 SSUM NAME # 1 D 1009000