CERTIFICATE OF ASSUMED BUSINESS NAME

	(Please type or print legibly	y. See instructions on reverse.)
		TATE OF IDAHO Idaho Code, the undersigned A Assumed Business Name State of the undersigned of the undersigned of the undersigned of the undersigned use (s) in the transaction of
1.	The assumed business name which the business is:	And and add do do and and add and and and and and and and
	OLSON Backhoe Servic	e,
2.	The true name(s) and business address business under the assumed business in	s(es) of the entity or individual(s) doing name is/are:
	<u>Name</u>	Complete Address
		7954NISE IDAGO FALLS, 83401
	tred OLSon	7954N 15F IdAno FALLS, 83401
	ColleenOLSon	7954N 15E IJAHO FALLS, 83401
3.	The general type of business transacted (mark only those that apply)	d under the assumed business name is:
	Retail Trade Manufactu Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4.	The name and address to which future correspondence should be addressed:	Phone number (optional):
	Olson BACKhoe Service	Submit Certificate of
	7954 N 15 E	Assumed Business
,		Name and \$20.00 fee to:
-	IdAhofALLS, Id 83401	Secretary of State
5.	Name and address for this acknowledge	700 West Jefferson nent Basement West
	COPY IS (if other than # 4 above):	PO Box 83720
		Boise ID 83720-0080 208 334-2301
		IDANO SECRETARY OF STATE
		Secretary of State use only 11/08/2000 09:00 CK: 2535 CT: 138261 M: 359747
		l e

Signature: Colleen Olson

Printed Name: Collect Olson

Capacity: <u>owner</u>

(see instruction # 8 on back of form)

1 9 29.00 = 20.00 ASSUM WANE # 2

D 40370