

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 MAY 14 AM 8: 32

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

<ol> <li>The assumed business name which the undersigned business is:</li> <li>Meadows Valley Con</li> </ol>		- ji
2. The true name(s) and business address(es) of the enbusiness under the assumed business name:  Name  Thomas L. Perkins POB  Neu	ntity or individual(s) doing  Complete Address  OX 643  J Meadows TD  83654	
The general type of business transacted under the as      Retail Trade      Transportation and Puble	- -	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Meadows Valley Construction POBOX 1043 New Meadows TD 83654  5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
Inature: Tom Perkins  Inacity/Title: Owner(Ocenative)	Secretary of State use only  IDAHO SECRETARY  05/14/2010  CK: 8519 CT: 285868	OF STATE  Ø5 : Ø2

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