

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

05 FEB -3 FN 12: 49

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

(see instruction # 8 on back of form)

SECRETATE OF STATE
STATE OF IDAHO

The assumed business name which the unbusiness is: Honey - Do's Handyr	` ^
2. The true name(s) and <u>business</u> address(es business under the assumed business nam Name Dean Mort	of the entity or individual(s) doing ne: Complete Address P.O. Box 990 Eagle, Tobio 83010
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Dean Mort P.D. Box 9916 Eagle, Idaho 83614	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt Phone number (optional):
	Secretary of State use only
Signature:	IBAHO SECRETARY OF STATE Page

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