THEO EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 MAR 15 AM 9: 08

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SEUNCIARY OF STATE STATE OF IDAHO

NOTE: See mandadions of the contract	SIMIE OF IDATIO
The assumed business name which the und business is:  KP Estimating	dersigned use(s) in the transaction of
2. The true name(s) and business address(es business under the assumed business name  Name  Philip C. Robbins	of the entity or individual(s) doing le:  Complete Address  2728 E. Hayden View Dr. (d.4, ID)  8386
3. The general type of business transacted under the assumed business name is:  Retail Trade  Transportation and Public Utilities	
<ul> <li>Wholesale Trade ☐ Construction</li> <li>Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Secretary of State
Philip Robbins  2728 E. Hayden View Dr.  (oeur d'Atene, ID 83815	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgm copy is (if other than # 4 above):</li> </ol>	ent Phone number (optional):
Signature: Philip C. Robbins  Printed Name: Philip C. Robbins	Secretary of State use only  Secretary of State use only  DATA SECRETARY OF STATE  3.16/2004 05:00  CK: 1764 CT: 177496 BH: 733349  1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: <u>Sole proprietor</u> owner	- 1 0 25.00 = 25.00 ASSUM NAME # 2