

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 APR 25 AM 8:41 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the business is:  Halford Dry wal	
2. The true name(s) and business address business under the assumed business representations of the second	s(es) of the entity or individual(s) doing name:  Complete Address  497 \$ 250\$ Burley \$ \$ 250\$
3. The general type of business transacted	d under the assumed business name is:
Retail Trade Transportate Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	e Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  HAL Ford Drywall & Remains 1975 250 E.	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080  (208) 334-2301
5. Name and address for this acknowledg copy is (if other than #4 above):	 jment
	Secretary of State use only
gnature: Blaine L. Halford  inted Name: Blaine L. Halford  apacity/Title: nwner  (see instruction # 8 on back of form)	- Set very set of state  IDAHO SECRETARY OF STATE  94/25/2008 05:06  CX: 2139 CT: 225316 BH: 11118: 1 9 25.00 = 25.00 ASSUM NAME