

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

Ca	hbridge Homes,
The true name(s) and business add business under the assumed busin	ess(es) of the entity or individual(s) doing
Name	Complete Address
Ryan Walker	3911 Rose Hill Street, Boise, ID 3705
_	<u> </u>
	3
	eted under the assumed business name is:
Services Agric Manufacturing Minin Finance, Insurance, and Rea	Assumed Business
The name and address to which full correspondence should be address Ryan Walker	re Secretary of State
3911 Rose Hill Street	Boise ID 83720-0080
Boise, ID 83705	208 334-2301
5. Name and address for this acknown copy is (if other than # 4 above):	edgment Phone number (optional): 208-230-2639
	Secretary of State use only
nature:	Secretary Of State
pacity/Title: Owner	11/18/2005 05 = CK: 2137 CT: 158010 BH: 92
(see instruction # 8 on back of form)	

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