CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO

OI MAR 30 AM 10: 0	UI	II MA	R 30	AM	1():	0	1
--------------------	----	-------	------	----	------	---	---

Pursuant to Section 53-504, Idaho Code, the undersigned ORFIGE STATE

	gives notice of adoption of an Assumed Busin	ness Name. STATE OF JOAHO				
1.	The assumed business name which the undersigned us business is:					
	Quality Construction					
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:					
	Name Co.	mplete Address  2001 Dr. Green hal ID. 18426				
	Leroy I SMAC 123 Myster	ect caldwell Id 83605				
3.	The general type of business transacted under the assu (mark only those that apply)	med business name is:				
	☐ Wholesale Trade ☐ Agriculture ☐ Fin	ansportation and Public Utilities ance, Insurance, and Real Estate ning				
4.	The name and address to which future Phone numbe correspondence should be addressed:	· · · · · ·				
	Quality Construction 21132 Cottonwood Dr.	Submit Certificate of Assumed Business Name and \$20.00 fee to:				
_	Green lea f. Idaho 13626	Secretary of State 700 West Jefferson				
Ο.	Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301				
	667	Secretary of State use only IDAHO SECRETARY OF STATE				
	ion 12/99	03/30/2001 09:00				

20.00 CURRENCY # 1 20.00 ASSUM NAME # 2

D44042

Signature: Calalio Delgado Jr.

Printed Name: Eulalio Delgado JR.

Capacity:

(see instruction # 8 on back of form)