CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

FILED To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the understoned py 2: 13

	gives notice of adoption of an As	ssumed Business Name.
1.	The assumed business name which the un	ndersigned use(s) in the framsaction of
	business is:	
	Hill Drywa	
	3	
2.	The true name(s) and business address(es) of the entity or individual(s) doing	
	business under the assumed business name is/are:	
	, <u>Name</u>	Complete Address
	Neal Hill - 2	801 19th Street Lewiston ID 8350
	Kathy Hill 8	301 19th Street Lewiston 1D 83501
3	The general type of business transacted ur	oder the assumed husiness name is:
J.	(mark only those that apply)	idel the assumed business hame is.
	Retail Trade Manufacturing	g U Transportation and Public Utilities
	Wholesale Trade Agriculture	Finance, Insurance, and Real Estate
ě	☐ Services ☐ Construction	Mining
Ā	The name and address to which future P	Phone number (optional): 2087432487
⁴.	correspondence should be addressed:	Holle Humber (optional).
	Hill Drywall	
		Submit Certificate of
	801 19th Street	Assumed Business Name and \$20.00 fee to:
	Lewiston ID 83501	Name and \$20.00 fee to.
	(400(3)0(1) 1D (3)30(Secretary of State
5	Name and address for this acknowledgmer	700 West Jefferson
5.	COPY is (if other than # 4 above):	Basement West PO Box 83720
	copy to (if other than # 4 above).	Boise ID 83720-0080
		208 334-2301
		Secretary of State use only
		Secretary of State use only
	2 ()	IDAHO SECRETARY OF STATE 81/20/2006 09:00 61/20/2008 09:00
Sianatı	ire: Xed Hell	\$ 61/20/2000 09:00 CK: 3628 CT: 125493 BH: 283868
		1 8 28.96 = 29.06 ASSUM NAME # 2
Printed	Name: Neal Hill	
Capaci	ty: president	D 32336
	(see instruction # 8 on back of form)	D 32336