

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE 2009 JAN 20 PM 2: 44

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

|  | _  |
|--|--|
| The assumed business name which the undersign        | ned use(s) in the transaction of                             |
| business is:   | 4 4  |
| Back Country Const                                   | riction  |
| 2. The true name(s) and business address(es) of the  | e entity or individual(s) doing                              |
| business under the assumed business name:            | i com, or manname, acmy                                      |
| Name   | Complete Address   |
| James E Malley P.                                    | 0. Box 53<br>reenled FD 83626                                |
| 6  | reenled ID 83626   |
|  |  |
|  |  |
| 3. The general type of business transacted under the | e assumed business name is:                                  |
| Retail Trade Transportation and F                    | Public Utilities   |
| ☐ Wholesale Trade ☒ Construction                     |  |
| Services Agriculture                                 | Submit Certificate of  |
| ☐ Manufacturing ☐ Mining                             | Assumed Business   |
| Finance, Insurance, and Real Estate                  | Name and \$25.00 fee to:                                     |
| 4. The name and address to which future              | Idaho Secretary of State                                     |
| correspondence should be addressed:                  | 450 N 4th Street   |
| James E Malles                                       | PO Box 83720<br>Boise ID 83720-0080                          |
| P.O. Box 53  | (208) 334-2301   |
|  | (208) 334-2301   |
| Greenleaf FD 83626                                   |  |
| 5. Name and address for this acknowledgment          |  |
| COPY is (If other than # 4 above):                   |  |
|  |  |
|  | Secretary of State use only                                  |
|  | $O(2\pi)$  |
| Signatura & Ma OQ                                    | これをター  |
| Signature: (signature required)                      |  |
| Printed Name: James E Malles                         | IDAHO SECRETARY OF STATE 01/21/2009 05:0                     |
| Signature:   | CK: 5539 CT: 233296 MH: 1153:<br>1 0 25.00 = 25.00 ASSUM HAM |
| (see instruction #8 on back of form)                 |  |