

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

11 SEP -1 AM 8: 56

SECRET BY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

DAN BROV	WN CONSTRUCTION
The true name(s) and <u>business</u> address business under the assumed business r <u>Name</u> DAN D. BROWN	
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	e Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: PO BOX 5257 TWIN FALLS ID 83303	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgr copy is (if other than #4 above):	ment
	Secretary of State use only
Signature: Dan D. BROWN	_
Printed Name: DAN D. BROWN Capacity/Title: OWNER	
Signature: Din D. Rom	_
Printed Name: DAN D. RRWN Capacity/Title: DWNAR	IDANO SECRETARY OF STATE 99/01/2011 05:00 CK: 2991 CT: 158810 BH: 128882 1 0 25.00 = 25.00 ASSUM MANE

1 @ 25.08 = 25.00 ASSUM NAME N 2