



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

05 SEP 16 PM 2: 16

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

BroSosa Insulation

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Ubaldo Sosa

Mariu Stiles

Complete Address

RT 1 Box 843 #1B

124 A Deer Dr Williamsburg, VA

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

RT 1 Box 843 #1B

Mountain Home ID

83647

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208-587-3461

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SA Me

Signature: Ubaldo Sosa
(signature required)

Printed Name: Ubaldo Sosa

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

091699

IDaho SECRETARY OF STATE
09/16/2005 05:00
CK: CASH CT: 150810 BM: 912124
1 @ 25.00 = 25.00 ASSUM NAME # 2