

## 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 APR -5 PM 3: 31

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is:  Perfect Co	
2. The true name(s) and business address(es business under the assumed business name Name  Maiko Newarez	
- 1000	nder the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  411 S. Brook Trout Way Meridian ID 83642	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
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional): 208.761-7207
nature: Www.  (signature refure):  nted Name: Marko Nevavez  pacity/Title: owner  (see instruction # 8 on back of form)	Secretary of State use only  1 DAHO SECRETARY OF STATE  24/05/2005 05:00  CK: 295 CT: 158010 BH: 802884  1 @ 25.00 = 25.00 ASSUM NAME #