



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

2005 JUL 11 11:17

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Pan Handle Masonary

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

Name
Louis Fronio

Complete Address

5392 West Seasons Rd.
Bathelrum ID 83858

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 - <u>Masonry</u> |
| <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:

Louis Fronio
5392 West Seasons Rd.
Bathelrum ID 83858

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 acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-691-5560

Secretary of State use only

Signature: Louis Fronio
(signature required)

Printed Name: LOUIS FRONIO

Capacity/Title: OWNED

(see instruction # 8 on back of form)

g:\corp\forms\abn form\slabn p65
Revised 04/2003

IDAH0 SECRETARY OF STATE
07/18/2005 05:00
CK: 46777554340 CT: 158018 BH: 821880
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 89786