

**FILED EFFECTIVE**

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2015 MAY 14 PM 12:00

SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**Instructions are included on back of application.**

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

# PRO TINT & GLASS

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

Name

### Complete Address

Name  
Mike Hendricks

1110 Yellowstone Avenue Suite C  
Pocatello ID 83201

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

- ☐ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☒ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate
- Submit  
 Assume  
 Name

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

Mike Hendricks  
110 Yellowstone Ave Suite C  
Pocatello ID 83201

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

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

**Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301**

**Secretary of State use only**

Signature: [Signature]

Printed Name: Mike Hendricks

Capacity/Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

IDAHO SECRETARY OF STATE

05/14/2015 05:00

CK:2837958 CT:172099 BH:1475541  
1@ 25.00 = 25.00 ASSUM NAME #2

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