

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

10 MAR -8 AM 9:30

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under	STATE OF IDAHO rsigned use(s) in the transaction of
business is:	
Management Maintain	+ Repairs
The true name(s) and business address(es) or business under the assumed business name:	f the entity or individual(s) doing
Name	Complete Address
Slaine Wood Z	569 Cypress In numea ID
	83687
3. The general type of business transacted unde	r the assumed business name is:
☐ Retail Trade ☐ Transportation ar ☐ Wholesale Trade ☒ Construction	nd Public Utilities
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street PO Box 83720
River 1 Dood	Boise ID 83720-0080
7569 Cypress In	(208) 334-2301
Neumon ID 83687	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
copy to (notice many 4 above).	
	Secretary of State use only
(.Z) 0 40 ()	99
Signature: Nova	29
Printed Name: Blaune (Jood	Plytomstation formstation poly
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IDAHO SECRETARY OF STATE

03/08/2010 05:00

CK: 779 CT: 158818 MH: 1211534

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