S

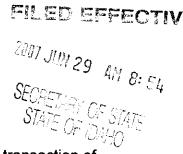
(see instruction # 8 on back of form)



## **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.



Rivas Quali	ty Construction
The true name(s) and business address(es business under the assumed business name	
	nder the assumed business name is:
<ul> <li>Wholesale Trade ✓ Construction</li> <li>Services ☐ Agriculture</li> <li>Manufacturing ☐ Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:      Anselmo Rivas     101 East Mallard Dr. #173  Boise,ID 83706	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) 860-5228
	Secretary of State use only
ignature:  which is a pacity/Title:  which i	IDAHO SECRETARY OF STATE  O6/29/2007 05:0  CK: 127 CT: 158010 BH: 10625  1 9 25.00 = 25.00 ASSUM NAME