S



## **CERTIFICATE OF**

ASSUMED BUSINESS NAMEJAN 23 AM 8: 03

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Starte TARY OF STATE Please type or print legibly.

STATE OF IDAHO

TE: See instructions on reverse before Target Plants.

NOTE: See instructions on reverse before filing.  1. The assumed business name which the undersigned use(s) in the transaction of business is:  One handy Man			
		2. The true name(s) and business address(es) business under the assumed business name  Name	
		3. The general type of business transacted und  Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:		
4. The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080		
ANtonio Pina PoBox 2732 Harley Id 83333	(208) 334-2301		
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	nt .		
ROBON 2732 Hayley # 2 83333	Secretary of State use only		
Signature: Confession (Signature required)  Printed Name: Antonio Rina  Capacity/Title: owner	IDAHO SECRETARY OF STATE  1027/PO DESIGNATE  1027/P		
(see instruction # 8 on back of form)	1 8 25.00 = 25.00 ASSUM NAME # 2		

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