

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.

06 NOV 30 PM 12: 21

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

83613

| | SIAIE OF IDAHO |
|--|---|
| 1. The assumed business name which the undersigned | ed use(s) in the transaction of |
| business is: | D. 11 |
| Treasure Valle | y Painting |
| 2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: | entity or individual(s) doing |
| Name . | Complete Address |
| Leticia COTA 320 | 2 S Westlamy P/ Eagle |
| | 0 |
| | |
| 3. The general type of business transacted under the | accumed business name is: |
| 5. The general type of business transacted under the | assumed business name is. |
| Retail Trade Transportation and Pu | blic Utilities |
| Wholesale Trade Construction | |
| | Submit Certificate of |
| ☐ Manufacturing ☐ Mining | Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$25.00 fee to: |
| 4. The name and address to which future | Secretary of State |
| correspondence should be addressed: | 700 West Jefferson |
| Laticia Cota | Basement West |
| | PO Box 83720 Boise ID 83720-0080 |
| 3202 S. Westbury Pl. | 208 334-2301 |
| Eagle ID 83416 | |
| Name and address for this acknowledgment copy is (if other than # 4 above): | Phone number (optional): |
| | *************************************** |
| | Secretary of State use only |
| 10 | |
| Delai Cot | |
| Signature: (F) (Signature required) | |
| Signature: Puttua Cota Printed Name: Lcticia Cota Capacity/Title: Dwner | IDAHO SECRETARY OF STATE 11/30/2006 05:00 |
| Capacity/Title: Dwner g | THE 25.00 × 25.00 ASSUM MANE 8 2 |
| (see instruction # 8 on back of form) | · |

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