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CERTIFICATE O ASSUMED BUSINE	SS NAME FILED EFEFOT
Pursuant to Section 53-504, Idaho Cod submits for filing a certificate of Assum	ed Business Name.
Please type or print legibly. Instructions are included on back of application.	
1. The assumed business name which the business is:	
Larry's Handyman	· · · · · · · · · · · · · · · · · · ·
2. The true name(s) and <u>business</u> address business under the assumed business	name:
Name	Complete Address
Laurance Black	302 N. Columbia
	Post Falls Id
	83854
<ul> <li>Wholesale Trade</li> <li>Construct</li> <li>Services</li> <li>Agricultur</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Est</li> <li>The name and address to which future correspondence should be addressed:</li> <li>Laurance Black</li> <li>302 N. Columbia</li> <li>Post Falls Id 83854</li> </ul>	Submit Certificate of         Assumed Business         tate         Name and \$25.00 fee to:         Secretary of State         450 North 4th Street         PO Box 83720         Boise ID 83720-0080         208 334-2301
5. Name and address for this acknowledg COpy is (# other than # 4 above): 	
Signature: 990	Secretary of State use only
Printed Name: Laurance Black	IDAHO SECRETARY OF STATE
Capacity/Title: Owner	01/12/0015 05.00
Signature:	CK:1739 CT:305113 BH:145684
Printed Name:	1C 25.00 = 25.00 ASSUM NAME
Capacity/Title:	~
a/21/2012 abr.pmd 1	D176031