

## **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.

2014 DEC 24 AM 8: 40

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

MICHELLE'S CONTRACTING SERVICES  2. The true name(s) and <u>business</u> address business under the assumed business r	
Name MICHELLE DORROUGH	Complete Address 3044 W SUGARBERRY DR, EAGLE ID 83616
3. The general type of business transacted Retail Trade Transportat Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	tion and Public Utilities on Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  MICHELLE DORROUGH  3044 W SUGARBERRY DR  EAGLE, ID 83616	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledged copy is (if other than # 4 above):	ment - -
Signature: Michelle Y- Louven Printed Name: MICHELLE DORROUGH Capacity/Title: OWNER Signature:	Secretary of State use only  IDAHO SECRETARY OF STATE  12/24/2014 05:00  CK:2114 CT:304445 BH:1454278  16 25.00 = 25.00 ASSUM NAME #2
Printed Name: 🕳 Capacity/Title:	D175666