## FILED EFFECTIVE

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CERTIFICATE OF	
ASSUMED BUSINESS NAME 07 OCT 31 AM 10: 03	
Pursuant to Section 53-504, Idaho Code, the unde	ersigned
submits for filing a certificate of Assumed Business	Narbe CRETARY OF STATE
Please type or print legibly. NOTE: See instructions on reverse before filing	JIAIT OF MAUN
the set was made to is on reverse perceating	g.
1. The assumed business name which the undersign	ad use(s) in the transaction of
business is:	
Pinnacle Custom Pa	and in a
2. The true name(s) and business address(es) of the	entity or individual(s) doing
business under the assumed business name: Name	
	Complete Address
Miquel Saqvedra 1	385 Benton St Apt 6
Miquel Saquedra 1	daho Falls, ID 83401
3. The general type of business transacted under the	conumed husings and
	assumed business name is:
Retail Trade Transportation and Pi	ublic Utilities
Wholesale Trade Construction	
Services Agriculture	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	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street
Miquel Seave dea	PO Box 83720 Boise ID 83720-0080
1385 Bonton St Apt 6	(208) 334-2301
Idaho Falls, ID 8340/	
<ol><li>Name and address for this acknowledgment</li></ol>	
COPY IS (if other than #4 above):	
	Secretary of State use only
M	
Signature:	
Printed Name: Miguel Saguedra	SALLA AFARTANY AT CTATE
Capacity/Title:	IDAHO SECRETARY OF STATE 10/31/2007 05:00
(see instruction # 8 on back of form)	CK: 57269902338 CT: 156018 BH: 18536 1 8 25.08 = 25.08 ASSUN NAME # 2
(coo approving a o na psek of form)	× 11 111
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