

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

11 JUL -8 AM 8:35

STATE OF IDAHO

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

Handyman Concierge			9
2.	The true name(s) and <u>business</u> address(e business under the assumed business name Name CK Rogers Inc	me:	ntity or individual(s) doing <u>Complete Address</u> Silver City Ct Ste B1
	C 142809	Boise, ID	83704
	The general type of business transacted uses a Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Pub	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Handyman Concierge 10587 W Silver City Ct Boise, ID 83704		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Secretary of State use only
Signa	ature:		
	ed Name: Clint Rogers		
Capa	city/Title: President		IDAHO SECRETARY OF STATE
Signa	ature:		07/08/2011 05:00 CK: 18664 CT: 268453 BH; 1281556
Printe	ed Name:		1 9 25.00 = 25.00 ASSUM HAME # 2
Capa	acity/Title:		T

abn.pmd Rev. 07/2010

1) (48803