

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

08 SEP 22 PM 1:32

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Olsen Roofing

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
<u>Robert Olsen</u>	<u>1009 Edgemont Rd. Emmett, ID 83617</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:

- | | |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080
(208) 334-2301

4. The name and address to which future correspondence should be addressed:

Olsen Roofing
1009 Edgemont Rd.
Emmett, ID 83617

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Robert Olsen
(signature required)

Printed Name: Robert Olsen

Capacity/Title: Olsen Roofing
(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\form\state\form\state\form.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
09/22/2008 05:00
CK: 5749629947 CT: 158810 BH: 1136949
I # 25.00 = 25.00 ASSUM NAME # 2

D125080