

Printed Name: Roberto

(see instruction # 8 on back of form)

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

06 **FEB** (

FILED EFFESTIVE

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

R&A TILE	
he true name(s) and business address(es) of usiness under the assumed business name: Name Rosecto Ayala	Complete Address
The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Yes Point Pl	r the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than #4 above):	Disconnection (artismal):

IDAHO SECRETARY OF STATE **02/24/2006 05:00** CK: 1079 CT: 158010 BH: 939387 1 0 25.00 = 25.00 ASSUM NAME # 2

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