

CERTIFICATE OF ASSUMED BUSINESS NAME

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

submits for filing a certificate of Assumed Business Name.

2013 OCT -7 AM 10: 09

FILED EFFECTIVE

SECREMENT OF STATE STATE OF IDAHO

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

| The assumed busin business is: KOEPL FLOORS AND | | ersigned use(s) in the transaction of |
|---|-----------------------------|---|
| | assumed business name ne | of the entity or individual(s) doing : Complete Address 100 DAVIS RD, VIOLA, ID 83872 |
| 3. The general type of Retail Trade Wholesale Trace Services | Transportation a | er the assumed business name is: and Public Utilities |
| ☐ Manufacturin☐ Finance, Inst | g | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| The name and address to which future correspondence should be addressed: RONALD KOEPL 1100 DAVIS RD | | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 |
| VIOLA, ID 83872 | | 208 334-2301 |
| 5. Name and address copy is (if other than #4 | for this acknowledgment | |
| | ,,, | Secretary of State use only |
| Signature RONAL D.K. | | |
| Printed Name: RONALD Ko Capacity/Title: OWNER | <u> </u> | |
| - • | | IDAHO SECRETARY OF STATE |
| Signature: Printed Name: | | 19/08/2013 05:00 CK: 542211 CT: 288389 BH: 1393867 |
| Capacity/Title: | | 1 0 25.00 = 25.00 ASSUM NAME 1 2 |

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