



# 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**

07 JUN 21 PM 1:25

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

LUNA HOMES CONSTRUCTION

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>CESAR A. LUNA</u> | <u>16740 N. GENTRY DR. NAMPA, ID</u><br><u>83687</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:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

CESAR LUNA

16740 N. GENTRY DR.

NAMPA, ID 83687

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone number (optional):

(208)941-2149

Signature

(signature required)

Printed Name:

CESAR A. LUNA

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

0112629

IDAHO SECRETARY OF STATE  
06/21/2007 05:00  
CK: 1187651 CT: 172099 BH: 1061670  
1 @ 25.00 = 25.00 ASSUM NAME # 2