

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.

Capacity/Title: SOLE PROPORITER CONNER) (see instruction # 8 on back of form)

	> \$1\frac{1}{2} = (1.1\frac{1}{2})
<ol> <li>The assumed business name which the un business is:</li> </ol>	dersigned use(s) in the transaction of
McCALC REMODELIA	V6 COMPANY
2. The true name(s) and business address(es	
business under the assumed business nan Name	ne: Complete Address
WILLIAM M. ERLEBACH	PO Box 2196
	McCALL, IDAHO 83638
The general type of business transacted ur	nder the assumed business name is:
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction	and Public Utilities
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
MIKE ERCEBACH PO Box 2196	PO Box 83720 Boise ID 83720-0080 208 334-2301
McCAU, 10AH 83638	
<ol><li>Name and address for this acknowledgme copy is (if other than # 4 above).</li></ol>	Phone number (optional):  208-634-3663
	Secretary of State use only
Signature: Mike Estelad	IDAHO SECRETARY OF STATE  ### STA
Printed Name: MIKE ERCEBAH	IDAHO SECRETARY OF STATE  ##################################
Capacity/Title: SOLE PROPORITER (OWNER)	CK: 1659 CT: 213432 BH: 1054093 1 0 25.00 = 25.00 ASSUM NAME # 2