

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

## FILED EFFECTIVE

2013 AUG -7 AM 8 58

submits for filing a certificate of Assumed Business Name. Please type or print legibly. Instructions are included on back of application.

Finestra Services	
The true name(s) and <u>business</u> address(extended business under the assumed business name     Name     Samuel Sabin	s) of the entity or individual(s) doing me: <u>Complete Address</u> 133 Pine St hailey, ID 83333
Wholesale Trade Construction	nder the assumed business name is: n and Public Utilities
<ul> <li>☐ Services</li> <li>☐ Manufacturing</li> <li>☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Finestra Services	Secretary of State 450 North 4th Street PO Box 83720
P.O. Box 9160 Ketchum, ID 83340	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
nature:	Secretary of State use only
nted Name: Samuel Sabin	
pacity/Title: Owner	
nature:	
nted Name:	
pacity/Title:	IDAHO SECRETARY OF STATE 08/07/2013 05:00
abrumid Rev (7/2)	CK: 1226 CT: 286153 BH: 138516

D164975