



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

12 JAN 27 AM 11:56

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

ADVANTAGE SEAMLESS RAIN GUTTER

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

Shane W. Wood

7585 W. PORTOLA DR. BOISE ID 83709

ANTHONY S. MONTAGNINO

13160 S. CLOVERDALE RD. KUNA, ID 83634

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:

Shane Wood

9585 W. PORTOLA DR

BOISE, ID 83709

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

Signature: Shane W. Wood

Printed Name: Shane W. Wood

Capacity/Title: PARTNER

Signature: Anthony S. Montagnino

Printed Name: Anthony S. Montagnino

Capacity/Title: Partner

Secretary of State use only

IDAHO SECRETARY OF STATE
01/27/2012 05:00
CK: CASH CT: 150010 BH: 1300110
1 @ 25.00 = 25.00 ASSUM NAME # 2

D152855