

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2014 MAR 25 AM 8:58

SECRETARY OF STATE STATE OF IDAHO

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

Instructions are included on back of application.

1.	The assumed business name which the unbusiness is:	dersigned	I use(s) in the transaction of	
	THOMPSON PAINTING			
	THOMESON FAINTING			
2.	The true name(s) and business address(es) of the entity or individual(s) doing			
	business under the assumed business name	ne:		
	<u>Name</u>		Complete Address	
	NOLAN G. THOMPSON 661 PRIM		MROSE DR PAUL, ID 83347	
3.	The general type of business transacted ur	nder the a	ssumed business name is:	
0.	Retail Trade Transportation and Public Utilities			
	Wholesale Trade Construction	i ana i ac		
	Services Agriculture	1		
	☐ Manufacturing ☐ Mining		Submit Certificate of	
			Assumed Business	
	☐ Finance, Insurance, and Real Estate		Name and \$25.00 fee to:	
4.	The name and address to which future		Secretary of State	
	correspondence should be addressed:		450 North 4th Street	
	NOLAN G. THOMPSON		PO Box 83720	
	661 PRIMROSE DR		Boise ID 83720-0080 208 334-2301	
	PAUL,ID 83347		200 004 2001	
5.	Name and address for this acknowledgmen	nt		
	COPY IS (if other than # 4 above):			
			Secretary of State use only	
Signa	ature: 1 oby I The sura \			
Printed Name: NOLAN G. THOMPSON			10169979	
	acity/Title: OWNER		1314(17)	
Signature:			IDAHO SECRETARY OF STATE	
•	ed Name:		03/25/2014 05:0 CK: 98315561 CT: 294791 BH: 14	116918
	V4 (14111V.		1 @ 25.00 = 25.00 ASSUM NAI	Æ#2

Capacity/Title: