

Printed Name: 4

Capacity/Title: (\(\)\)

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 223 [42] 1 8: 55

Please type or print legibly. NOTE: See instructions on reverse before filing.

	MOTE. See instructions on reverse ber	<u>ore niing.</u>
		A STELLE IDAHO
1.	The assumed business name which the up business is:	ndersigned use(s) in the transaction of
		101
	Lakeside Roofina	3 9 SIDING
2	The true name(s) and business address(s	
	The true name(s) and <u>business</u> address(e business under the assumed business nar	ne.
	<u>Name</u>	Complete Address
	<u></u>	12984 S. FLICKER LN. HARRISON
		1940 SI LICIEN CIV. HAKKISA
		TP 83833
3.	The general type of business transacted ur	nder the assumed business name is:
	·	
	Wholesale Trade Construction	and Public Utilities
	Services Agriculture	The state of the s
	☐ Manufacturing ☐ Mining	Submit Certificate of
		Assumed Business Name and \$25.00 fee to:
	Finance, Insurance, and Real Estate	rame and \$25.00 fee (o.
	The name and address to which future	Secretary of State
	correspondence should be addressed:	700 West Jefferson Basement West
(offry Manes	PO Box 83720
	129184 S. Flicter (N	Boise ID 83720-0080
	1tallison 70 83837	208 334-2301
5.	Name and address for this acknowledgmen	nt Phone number (optional):
	copy is (if other than # 4 above);	208 661. 0820
	See Aprile.	200 001.0010
	TIVU C.	
		Secretary of State use only
	21	963
afu	(a) V a	Sed name

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