

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

6. FEB 12 ANIO: 43

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| | CMT Home Quality |
|--|--|
| The true name(s) and business address(es) of business under the assumed business name: | f the entity or individual(s) doing |
| Name | Complete Address |
| | 3004 N Wordy Dr |
| Joseph & Toney | 3004 N. Woody Dr. Boise, ID 83703 |
| | poist Lo Go |
| | |
| . The general type of business transacted unde | r the assumed business name is: |
| ☐ □ □ Transportation at | nd Public Utilities |
| | |
| Wholesale Trade ☐ ConstructionX Services ☐ Agriculture | 0.1.04.0-161 |
| | Submit Certificate of Assumed Business |
| Manufacturing Mining | Name and \$25.00 fee to: |
| Finance, Insurance, and Real Estate | Hamo and #2000 to 100 |
| . The name and address to which future | Secretary of State |
| correspondence should be addressed: | 700 West Jefferson |
| | Basement West |
| Same As about | PO Box 83720 Boise ID 83720-0080 |
| | 208 334-2301 |
| | 208 334-2301 |
| | Phone number (optional): |
| 5. Name and address for this acknowledgment | |
| COPY IS (if other than # 4 above). | |
| Some as before | |
| | Secretary of State use only |
| | 1 2 |
| - AM | apu bu |
| gnature: | 1000000000000000000000000000000000000 |
| (signature required) | IDAHO SECRETARY OF S |
| | → ** ** ** |
| nted Name: Joseph G Joseph | 02/12/2004 0 CK: 1284 CT: 158810 B |