



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

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

Full House Construction

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

JEFFERY R. LARSEN

1912 N. Leo Lane INKOM, Id

Kristie A. LARSEN

1912 N. Leo Lane INKOM, Id

P.O. Box 424 INKOM, Id

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 |  |

4. The name and address to which future correspondence should be addressed:

Full House Construction

1912 N. Leo Lane

INKOM, Id 83245

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Kristie A. Larsen

Printed Name: KRISTIE A. LARSEN

Capacity: OWNER

(see instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and **\$20.00** fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Phone number (optional):

(208) 775-3718

Secretary of State use only

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Revised 01/2001

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10/17/2001 05:00  
CK: 5882 CT: 152541 BH: 424822  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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