



# 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

03 JUL 27 PM 3:48

Please type or print legibly.

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

SECRETARY OF STATE  
STATE OF IDAHO

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

WINKLES MASONRY

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>RICHARD WINKLES</u>	<u>P.O. Box 7 NOTUS, ID. 83656</u>
_____	_____
_____	_____

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

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

RICHARD WINKLES  
P.O. Box 7  
NOTUS, ID. 83656

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

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

Phone number (optional):

\_\_\_\_\_

Signature: Richard Winkles  
(signature required)

Printed Name: RICHARD WINKLES

Capacity/Title: MANAGER  
(see instruction # 8 on back of form)

g:\corp\form\stbn formstbn 065 Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/27/2005 05:00  
CK: 3689 CT: 158010 BH: 823655  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D90104