

CERTIFICATE OF ASSUMED BUSINESS NAME

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

02 MAR - 4 KA 9: 07
STATE OF TOATION

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the un business is: Wells Painting & D.	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Scott (1)e//s Hacold Wells 3. The general type of business transacted units	Complete Address 1250 canyon Creek Road Mtn Home II 8364) 210 WITN Mtn Home I 83642
_	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
Signature: Scott Wells Printed Name: Scott Wells Capacity/Title: Owner	Secretary of State use only Secretary of State use only 100210 possure use only IDAHO SECRETARY OF STATE 23/04/2002 05:00 CK: 3187 CT: 158818
(see instruction # 8 on back of form)	CK: 3187 CT: 158810 BH: 449658 1 8 20.00 = 20.00 OSSIM MANC # 2

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