

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

05 JMI - 6 FH 12: 35

SEO, STATE

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

(see instruction # 8 on back of form)

 The assumed business name which the business is: 	undersigned use(s) in the transaction of
Tight Carpenty	
The true name(s) and business address business under the assumed business representation. Name	S(es) of the entity or individual(s) doing name: Complete Address 1568 (7/cen head Maridian , I 17 836 42
The general type of business transacted	d under the assumed business name is:
Retail Trade Transportate Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta 4. The name and address to which future correspondence should be addressed: 1568 Chica head Medical F D 83642	Submit Certificate of Assumed Business
 Name and address for this acknowledg copy is (if other than # 4 above): 	ment Phone number (optional): 2084 703 - 3678
	Secretary of State use only
Signature:	1000 1000
Capacity/Title:	- CK: 696385 CT: 172099 BH: 93065 CK: 696385 CT: 172099 BH: 93065 1 @ 25.00 = 25.00 ASSUM NAME #