

227



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.

FILED EFFECTIVE

03 NOV 24 PM 3:42

SECRETARY OF STATE
STATE OF IDAHO

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

Lowen & Sons 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

Tommy A. Lowen

P.O. Box 852 McCall ID

83638

1108 Alpine McCall ID 83638

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 \$20.00 fee to:
25.00

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:

Tommy Lowen
P.O. Box 852
McCall, ID 83638

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

Phone number (optional):

Secretary of State use only

Signature:

Tommy A. Lowen

Printed Name:

Tommy A. Lowen

Capacity/Title:

Owner

(see instruction # 8 on back of form)

g:\comp\business\form\idain-p45
Revised 01/2002

IDAHO SECRETARY OF STATE
11/24/2003 05:00
CK: 112435245399NJO CT: 172099 BH: 713403
1 @ 25.00 = 25.00 ASSUM NAME # 2

fax 208-334-2080

D 70891