



# CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE**

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

Please type or print legibly.  
Instructions are included on back of application.

2014 FEB 27 AM 9:25

**SECRETARY OF STATE  
STATE OF IDAHO**

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

R.J. Miles Construction

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>Rockie J. Miles</u>	<u>428 S. 1800 W.</u>
_____ _____ _____	<u>Pingree, Id. 83262</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	_____

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

Rockie J. Miles  
428 S. 1800 W.  
Pingree, Id. 83262

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

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

Secretary of State use only

Signature: Rockie J. Miles

Printed Name: Rockie J. Miles

Capacity/Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

IDAHo SECRETARY OF STATE  
02/27/2014 05:00  
CK: 4226 CT: 158818 BH: 1412483  
1 0 25.00 = 25.00 ASSUM NAME # 2

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