

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

2015 JAN -2 PM 2: 18

SECRETARY OF STATE STATE OF IDAHO

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

One Way Painting 2. The true name(s) and business address(ss) at	
The true name(s) and <u>business</u> address(es) of business under the assumed business name: <u>Name</u>	Complete Address
Caleb Dittemore 17	17 Sunnyridge Rd Apt 7A Nampa ID 83686
3. The general type of business transacted under Retail Trade Transportation an Wholesale Trade Construction	
ServicesAgricultureManufacturingMiningFinance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 1717 Sunnyridge Rd Apt 7A Nampa ID 83686 	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):	
ignature Lillo Com	Secretary of State use only
rinted Name: Caleb Dittemore apacity/Title: Owner	IDAHO SECRETARY OF STATE 01/02/2015 05:08 CK:236 CT:304701 BH:145529
rinted Name:	10 25.00 = 25.00 ASSUM NAME

abn.pmd Rev. 07/2010

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Capacity/Title:_