	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.
	1. The assumed business name which the undersigned use(s) in the transfection of HO
	JE DRYWALL
	2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: <u>Name</u> <u>Complete Address</u> <u>TJSTIN HUGHES</u> <u>ISCO Masters</u> <u>TJaleo Falls, ID, 83401</u>
	 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate
	4. The name and address to which future correspondence should be addressed: Secretary of State 700 West Jefferson Basement West 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
Pr	gnature: inted Name: J_{strik} J_{ctrik} J_{ctr