



**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.

NOTE: See instructions on reverse before filing.

07 APR -5 PM 2:02

SECRETARY OF STATE
STATE OF IDAHO

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

The Roof Doctor

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

Robert Raso

340 E. Boise St. Kuna 83634

- 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
- Submit
 Assume
 Name a

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

Robert Rasho
340 E Boise St
Kuna, ID 83634

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

Phone number (optional):

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

**Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301**

Secretary of State use only

Signature: Robert B. Rocho
(signature required)

Printed Name: Robert B Rasha

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Revised 04/2003

IDAHO SECRETARY OF STATE
04/05/2007 05:00
CK: CASH CT: 150010 BH: 1045163
10 25.00 = 25.00 ASSUM NAME 12

D110140