

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.

06 APR 17 PM 1: 36

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SECRETAL OF STATE STATE OF IDAHO

. The assumed business name which the und business is:	dersigned use(s) in the transaction of
NEW WOOD FRAMING	
The true name(s) and <u>business</u> address(es) business under the assumed business name) of the entity or individual(s) doing
Name	Complete Address
NESTOR BACA	4105 S. Robinson Rd
	KUNA 1D, 83634
Itctall ITado	nder the assumed business name is:
 Wholesale Trade Services Manufacturing Finance, 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:	Secretary of State 700 West Jefferson Basement West
WESTOR BACA	PO Box 83720
4105 S. Robinson Rd	Boise ID 83720-0080 208 334-2301
KUNA 1D, 83634	
 Name and address for this acknowledgme copy is (if other than # 4 above). 	ent Phone number (optional):
	Secretary of State use only
nature: <u>Baca</u> (signature required) Ited Name: <u>VESTOR BACA</u>	IDAHO SECRETARY OF STATE ### OPEN CONTROL ###
	1 8 25.00 = 25.00 ASSUM HAME
pacity/Title: Owner	D98872