

CERTIFICATE OF ASSUMED BUSINESS NAME

09 JUN -8 AM 8:36

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Owner/President

(see instruction # 8 on back of form)

Capacity/Title:

Turman Co	mmercial Painters
2. The true name(s) and business address business under the assumed business name Name E. Turman, Company, Inc.	
<u> </u>	
3. The general type of business transacted ☐ Retail Trade ☐ Transportat ☐ Wholesale Trade ☑ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta	on and Public Utilities n Submit Certificate of Assumed Business Nome and \$25.00 for to:
The name and address to which future correspondence should be addressed: 2055 Research Dr.	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
Livermore, CA 94550	(208) 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above).	nent
·	Secretary of State use only
gnature: (signature required) Inted Name: Dave Theobald	- 1980 upps source of the state

IDAHO SECRETARY OF STATE

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CK: 42884 CT: 237735 BH: 1173584

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