FILED EFFECTIVE



Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2018 JAN 29 AM 10: 01

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Granite Ridge Home Repair and Maintenance The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):			
2.				
	Jacob Welton		ay R	d., Hayden, ID 83835
	(Name)	(Address)		
	(Name)	(Address)	<u> </u>	
	(Name)	(Address)		
	(Name)	(Address)		
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade Wholesale Trade	Construction Agriculture		☐ Transportation and Public Utilities ☐ Mining
	Services	Manufacturing	3	Finance, Insurance, and Real Estate
4.	Mailing address for future	correspondence:	5.	Name and address for this acknowledgment copy is (if other than #4).
	Jacob Welton			
	(Name) 11790 E Mokins Bay Rd.			(Name)
	(Address)			(Address)
	Hayden, ID 83835			
	(City)	(State) (Zípcode)		(City) (State) (Zipcode)
Pr	Printed Name: Jacob Welton			Secretary of State use only
Sig	Signature: Jocof Welton			IDAHO SECRETARY OF STATE
Printed Name:				01/29/2018 05:00 CK:1 CT:351771 BH:1623652
Signature:				1@ 25.00 = 25.00 ASSUM NAME #2
Printed Name:				D100953

Rev. 08/2015