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CERTIFICATE OF	F FILED EFFECTIVE
ASSUMED BUSINESS NAMI Pursuant to Section 53-504, Idaho Code, the undersign submits for filing a certificate of Assumed Business Nami	ned
Please type or print legibly. NOTE: See instructions on reverse before filing.	SECRETARY OF STATE
	STATE OF IDAHO
1. The assumed business name which the undersigned use(s) in the transaction of business is: <u>Collins Construction and Remodeling</u>	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
Joseph Collins 5/36 Boise	N Edenburgh WY 2, ID 83714
3. The general type of business transacted under the assumed business name is:	
<ul> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Manufacturing</li> <li>Finance, Insurance, and Real Estate</li> </ul>	lic Utilities Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed: <u>Collins</u> <u>Construction &amp; Remodeling</u>	Secretary of State 700 West Jefferson Basement West PO Box 83720
5136 N Edenburgh Wy Poise ID 83714	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment Phone number (optional): copy is (if other than # 4 above):	
	Secretary of State use only
Signature: And (signature required)	
Printed Name: Jose ph E Collins	IDAHO SECRETARY OF STATE 02/20/2007 05 # 00 CK: 1855877 CT: 172899 BH: 1834188 1 \$ 25.88 = 25.88 ASSUM NAME # 2
Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	D108344