



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE

2004 AUG 26 AM 8:44

SECRETARY OF STATE
STATE OF IDAHO

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

Everlast Roofing

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

Edward L. Winger

PO Box 294 Ponderay Idaho 83852

Vicki R. Winger

PO Box 294 Ponderay Idaho 83852

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 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

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

Everlast Roofing c/o Vicki Winger

PO Box 294

Ponderay Idaho 83852

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

Phone number (optional):

(208)-263-2218

Secretary of State use only

Signature: _____

(signature required)

Printed Name: _____

Vicki R. Winger

Capacity/Title: _____

Office Manager

(see instruction # 8 on back of form)

g:\corp\formalabn\formalabn.pd5
Revised 04/2003

IDAHO SECRETARY OF STATE
08/26/2004 05:00
CK: 6453 CT: 158010 BH: 763027
1 @ 25.00 = 25.00 ASSUM NAME # 2

D79508