

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.



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

Performance Specialty

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name Jay L. Hiller Complete Address 2128 Grant St. Post Falls, Id. 83854
Jay L. Hiller 102 4th St. Post Falls, Id.
83854

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services (Automotive)	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Performance Specialty
102 4th St.
Post Falls, Id. 83854

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

Signature: Jay Hiller

Printed Name: Jay Hiller

Capacity: Sub-Contractor

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

IDAHO SECRETARY OF STATE
Secretary of State use only
09/18/1997 09:00
CX: 1400 CT: 87325 DM: 39523
1 @ 20.00 = 20.00 ASSUM NAME

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