



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

10 NOV 26 PM 1:32

Please type or print legibly.  
Instructions are included on back of application.

SECRETARY OF STATE  
STATE OF IDAHO

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

TIMBERSTEEL CUSTOM BUILDINGS

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

~~ROGUE STIERLE~~  
ROGUE STIERLE

1550 Jones St # H  
IDAHO FALLS, ID 83404

3. The general type of business transacted under the assumed business name is:

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

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

1550 Jones St # H  
IDAHO FALLS ID 83404

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Rogue Stierle

Printed Name: ROGUE Stierle

Capacity/Title: Owner

Signature: Rogue Stierle

Printed Name: ROGUE Stierle

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE  
11/26/2010 05:00  
CK: 1878 CT: 253894 DH: 1248639  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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