## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an Assumed			
1.	The assumed business name which the undersigned use(s) in the transaction of business is:  Fine Custom Homes & Carpet Installation			
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	<u>Name</u> Daniel Pocol	<u>451</u>	L Woodl	Complete Address and Ct TWin Falls, ID 83301
	Zamfira Pocol	<u>451</u>	L Woodl	and Ct TwinFalls, ID 83301
3.	The general type of business transacted unimark only those that apply)	ındı	er the a	assumed business name is:
	Retail Trade Manufacturing Wholesale Trade Agriculture XX Services XX Construction	1		Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Pho	one nur	mber (optional): (208) 736–9021
	Daniel Pocol 451 Woodland Ct			Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
	TWin Falls, ID 83301			Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgme copy is (if other than # 4 above):  D L Evans Bank  Attn: Laura			Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	POBox 87	ſ		Secretary of State use only
	Twin Falls, ID 83303-0087	ļ	Revision 2/97	IDANO SECRETARY OF STATE
Signat	gnature:		Revisi	01/13/1998 09:00 CK: 962101 CT: 24885 BH: 72474
•	inted Name: Daniel Pocol		ртб	1 8 28.88 = 20.88 ASSUM NAME
	apacity: Owner		согр¥огтs\abo pm6	7) 11175
	(see instruction # 8 on back of form)		τοτρίτ	