

Printed Name: Scott

Capacity/Title: 心いれたか

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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.

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SEG ... STATE

The assumed business name which the business is: Extreme Remodel	STATE OF IDAHO undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address business under the assumed business resolved business address business resolved business resolv	
3. The general type of business transacted Retail Trade Transportate Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
 4. The name and address to which future correspondence should be addressed: Scott A - Maynac J 3901 Spices # 1 CDA, TD 838/5 5. Name and address for this acknowledge copy is (if other than # 4 above): 	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): (208) 704-1/5 3
	Secretary of State use only

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