

## **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 07 0CT 22 AM 9: 20

Please type or print legibly. Please type or print legibly.

SECRETARY OF STATE

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The assumed business name which the under business is:	ersigned use(s) in the transaction of
business is: Finish Pro Drywall	
The true name(s) and business address(es) business under the assumed business name	<b>e:</b>
Name	Complete Address
<del></del>	MO 1/2 E. Lewis St.
	Pocatello ID 83201
3. The general type of business transacted und  Retail Trade Transportation  Wholesale Trade Construction  Services Agriculture	der the assumed business name is:  and Public Utilities  Submit Certificate of
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Michael Harris  1110 1/2 E. Lewis St.  Pocatello ID 83201	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above).</li> </ol>	nt
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE  10/22/2007 05:00  CK: 118 CT: 158818 BH: 1881526  1 2 25.88 = 25.88 ASSUM NAME # 2
Capacity/Title: Owner	1 9 25.98 = 25.96 ASSUM NAME # 2
(egg instruction # 8 on back of form)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1