



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE

05 SEP 26 PM 1:01

SECRETARY OF STATE
STATE OF IDAHO

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

Bonanza Drywall

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

Ector Dominguez

P.O. Box 2135 Homedale, Idaho 83628

Francisco Dominguez

P.O. Box 2135 Homedale, Idaho 83628

Gilberto Sanchez

P.O. Box 2135 Homedale, Idaho 83628

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

- | | |
|--|--|
| <input 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 type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

1100 Garrity Blvd.

Nampa, Idaho 83687

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

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

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

Ector Dominguez

P.O. Box 2135 Homedale, Idaho 83628

Phone number (optional):

Signature:

(signature required)

Printed Name: Ector Dominguez

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\abn form\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
09/26/2005 05:00
CK: 628356 CT: 172899 BH: 913575
1 @ 25.00 = 25.00 ASSUM NAME # 2

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