(see instruction # 8 on back of form)

## **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

2001 APR 20 AM 8: 57

SECRETARY OF STATE STATE OF IDAHO

D110697

1. The assumed business name which the undersigned business is:  Home Tailor Painting	use(s) in the transaction of
2. The true name(s) and business address(es) of the er business under the assumed business name:  Name  Touro Orjola 100  Coev	Complete Address 7 B S+
3. The general type of business transacted under the a	
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  Teuro Oriola  1007 B St COA TA 83814	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).	Phone number (optional):  (20)704 - 7067  Secretary of State use only
Signature: /cwo 0784  Printed Name: Teuvo Orjola  Capacity/Title: Owner	IDAHO SECRETARY OF STATE  94/20/2007 95:200  CK: 1995 CT: 212441 BH: 1948601 1 2 25.80 = 25.80 ASSUM MANE N