



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
DEPARTMENT 11-9-29
SECRETARY OF STATE
STATE OF IDAHO

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

Lawson Custom Exteriors

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
<u>Ashley Lawson</u>	<u>4583 E. Woodland Dr. Post Falls ID, 83854</u>
<u>Gabe Lawson</u>	<u>5836 E. Steamboat Bend, Post Falls ID, 83854</u>

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Ashley Lawson
4583 E. Woodland Dr. Post Falls ID, 83854

Submit Certificate of Assumed Business Name and \$25.00 fee to:
Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080
(208) 334-2301

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

Signature: Ashley Lawson
Printed Name: Ashley Lawson
Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/01/2008 05:00
CK: 1819 CT: 224442 BH: 1187785
1 @ 12.50 = 12.50 ASSUM NAME # 3

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