

Printed Name:

Capacity/Title:

(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.

FILED EFFECTIVE

IDAHO SECRETARY OF STATE

16/2008 05:00 9 CT: 116884 BH: 1119264

25.88 ASSUM NAME # 2

08 APR 16 AM. 8: 48

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: ho Cabinet Company 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 Franklin 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Idaho Secretary of State 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 lane (208) 334-2301 83642 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Same as Secretary of State use only Signature: 0121962