

## 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()? (CT 15 AT 10: 18

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF STATE

D59068

	577742 51 1571110
The assumed business name which the undersig business is:	ned use(s) in the transaction of
B. A. C. Qualit	y Siding
2. The true name(s) and <u>business</u> address(es) of th business under the assumed business name:	e entity or individual(s) doing
Name	Complete Address
	502 wst. Montana Ave)
3. The general type of business transacted under th	
☐ Retail Trade ☐ Transportation and Public Utilities ☐ Wholesale Trade ☒ Construction	
Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
BAC, Quality Siding	Basement West PO Box 83720
P.O. 130x 3/2 Homedale ID 83628	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: Charle Hamilton  Printed Name: Charles Hamilton  Capacity/Title: Proprietor	Thank
Printed Name: Charles Ham, I fon	IDAHO SECRETARY OF STATE 10/15/2002 05:00 CK: CASH CT: 158018 BH: 575851
Capacity/Title: Proprietor	1 @ 20.00 = 20.00 ASSUM NAME # 2