



# 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.

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

Three C's Fabrication

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

Chris Collins

P.O. Box 112 Notus ID 27656

Sandy Collins

P.O. Box 112 Notus ID 27656

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 type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input checked="" type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of  
Assumed Business  
Name and **\$20.00** fee to:

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

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

Chris Collins

P.O. Box 112

Notus ID 27656

Phone number (optional):

208-465-5641

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

Signature: Chris Collins  
(signature required)

Printed Name: Chris Collins

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporations\business forms\101\101-065  
Revised 09/2002

IDaho SECRETARY OF STATE  
09/25/2002 05:00  
CK: 2496 CT: 158010 BH: 490899  
1 P 20.00 = 20.00 ASSUM NAME # 2

DS8551