

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.

Please type or print legibly. NOTE: See instructions on reverse before filing. 台 100 - 7 PH 4: 13

STATE OF IDAHO

1. The assumed business name which the unde	rsigned use(s) in the transaction of
business is: 5/1/erado	PAINTING
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Senses	Complete Address Po Box 143 Kuna 83634
3. The general type of business transacted under the assumed business name is:	
□ Retail Trade □ Transportation a □ Wholesale Trade □ Construction □ Services □ Agriculture □ Manufacturing □ Mining □ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: □ Box 143	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
5. Name and address for this acknowledgment copy is (if other than #4 above):	t Phone number (optional):
	Secretary of State use only
Printed Name: Sames JENSEN Capacity/Title: OWNER (see Instruction # 8 on back of form)	IDANO SECRETARY OF STATE ##################################