

## **CERTIFICATE OF**

ASSUMED BUSINESS NAME
Pursuant to Section 53-504, Idaho Code, the undersigned D/EFFECTIVE submits for filing a certificate of Assumed Business Name.

Please type or print legibly

(see instruction #8 on back of form)

NOTE: See instructions on reverse before filing.	SAN SANDE
1. The assumed business name which the undersigned use(s) in the transaction of business is:  1. Nountain States Plumbing and Mechanical	
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name:  Name  Jeffery L. Muranda 102 n	Complete Address
<ol><li>The general type of business transacted under the assumed business name is:</li></ol>	
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Leffery L. Muranda Low Teal St  Name and address for this acknowledgment copy is (if other than #4 above):	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  Phone number (optional):  208 513-3037
	Secretary of State use only
Signature:  Printed Name: Sefery L. Mirando Capacity/Title: Owner  Capacity/Title: Owner	IDANO SECRETARY OF STATE 03/18/2002 05:00
Printed Name: <u>Settery L. Miranda</u>	CK: 2061 CT: 158010 BH: 452857 1 0 20.00 = 20.00 ASSUM NAME # 2