

Capacity/Title:

## 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.

2015 JUL 13 AM 9: 43

## Please type or print legibly. Instructions are included on back of application,

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the und business is:  Restor FX CDA	
The true name(s) and <u>business</u> address(es) business under the assumed business nam	of the entity or individual(s) doing
Name Perfekt Finish LCC (W136821)	Complete Address
The general type of business transacted un-	1316 Biztown Loop Hayoten, TD 83835 der the assumed business name is:
<u> </u>	and Public Utilities
Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Levi Overacker  1816 Biztown Loop  Havon, ID 83835	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	t
	Secretary of State use only
Signature:  Printed Name:  Capacity/Title:  Owner / President	IDAHO SECRETARY OF STATE  07/13/2015 05:00  CK:1091 CT:312316 BH:1483571  16 25.00 = 25.00 ASSUM NAME #
Signature:	0106222
Printed Name:	()(80233