

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.

OI MAY 18 AM 8: 47
SECRETARY OF STATE
OF TOAMO

. <u> </u>			••	
 The assumed business name which the un business is: 	dersigned	use(s) in the tra	insaction of	
Kevin's Handyman Service	& Things			
The true name(s) and <u>business</u> address(es business under the assumed business name Name) of the en e:	•	, 0	
Robert Kevin Lott		Complete Addr		
Robert Kevin Lott	125 N.	755 W. Blac	kfoot,ID 83221	
	<u> </u>			
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade X Construction			s name is:	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certific Assumed Busin Name and \$20	ness	
The name and address to which future correspondence should be addressed:		Secretary of St 700 West Jeffe Basement Wes	erson st	
<u>Kevin Lott</u> 125 N. 755 W.		PO Box 83720 Boise ID 83720-0080		
Blackfoot, Idaho 83221		208 334-2301		
5. Name and address for this acknowledgme copy is (if other than # 4 above):	nt	Phone number 681-1529	(optional):	
		Secretary of IDAHO SECRET	State use only	
La : PH =	corpilormslabn formslabn.p65 Revised 01/2001			
Signature: 9 VIII 1864	forms\ 1/2001		6046 BH: 397865 0.00 ASSUM NAME # 2	
Printed Name: Kevin Lott	forms/abn forms'		menen man z t	
Capacity: Owner	Ren	1 1	15417	

(see instruction #8 on back of form)