

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. Instructions are included on back of application.

business is: EAGLE CAP TILE 2. The true name(s) and business address(experiments)	s) of the entity or individual(s) doing
business under the assumed business nar Name Rudy Strohm	
3. The general type of business transacted u Retail Trade Transportatio Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Public Utilities Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Rudy Strohm 410 17th Ave Lewiston, TD 83501	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
Signature: Rudy Strohm Printed Name: Rudy Strohm	Secretary of State use only IDANO SECRETARY OF STATE 02/27/2015 05:00 CK:842420 CT:158010 BH:146372
Capacity/Title: OwnER	1@ 25.00 = 25.00 ASSUM NAME

D177112

Printed Name: _____

Capacity/Title:_____