



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

RECEIVED IN THE OFFICE OF THE SECRETARY OF STATE  
08 AUG -4 AM 8:30

08 AUG -4 AM 8:30  
SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Lakeshore Builders

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Lakeshore Inc. (C134629)

Complete Address

1100 E. Lakeshore Dr. Ste 101, Cda ID 83814

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Lakeshore Builders

1100 E. Lakeshore Dr. Ste 101

Coeur d'Alene, ID 83814

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: 

(signature required)

Printed Name: Donald F. Anderson

Capacity/Title: President

(see instruction # 8 on back of form)

g:\crp\forms\100\765  
Revised 04/2003

IDaho SECRETARY OF STATE  
08/04/2008 05:00  
CK: 3123 CT: 198656 BH: 1130097  
1 @ 25.00 = 25.00 ASSUM NAME # 2

0123805'