

(see instruction # 8 on back of form)

## **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.

2006 MAY 19 AM 9: 12

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

SIAIE OF IDAHO	
The assumed business name which the undersigned use(s) in the transaction of business is:	
Lakeside costom Plumb	oi ng
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:      Name      Complete Address	
Matthew claurese 14665	C. Antelopect. or J'Alene Id 83814
3. The general type of business transacted under the assumed business name is:	
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:	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol>	208-665-95//
	Secretary of State use only
Signature: Matthew Ciccurese  Capacity/Title: Owner	IDAHO SECRETARY OF STATE
Capacity/Title:	O5/19/2006 U5:00 CK: 1367 CT: 158010 BH: 955573 1 @ 25.00 = 25.00 ASSUM WAME # 2