



CERTIFICATE OF ASSUMED BUSINESS NAME

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

07 APR 27 AM 9: 01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

T.K. Masonry

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

<u>Name</u>	<u>Complete Address</u>
<u>Tom Holmes</u>	<u>216 Shoshone Dr Nampa Ida</u>
<u>Kristi Holmes</u>	<u>216 Shoshone Dr. Nampa Ida</u>

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:

216 Shoshone Dr. Nampa Ida

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

Secretary of State
450 North 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):

Phone number (optional):

208-409-0163
208-275-9211

Secretary of State use only

Signature: Tom Holmes

(signature required)

Printed Name: Tom Holmes

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\compform\statelab\formstatlab.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
04/27/2007 05:00
CK: 2199 CT: 212691 BH: 1049999
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 110885