

## CERTIFICATE OF ASSUMED BUSINESS NAME

## **FILED EFFECTIVE**

2014 HAY -9 AM 8: 53

SECRETARY OF STATE STATE OF IDAHO

## 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.

Integrity Home Improvements	
The true name(s) and <u>business</u> a business under the assumed bus Name	ddress(es) of the entity or individual(s) doing iness name: <u>Complete Address</u>
Gary Dekan	1303 W Shoshone Ave
	Nampa, ID 83651
Retail Trade Tran	nsacted under the assumed business name is: asportation and Public Utilities
<ul><li>☐ Services</li><li>☐ Manufacturing</li><li>☐ Min</li><li>☐ Finance, Insurance, and Remarks</li></ul>	Assumed Business
4. The name and address to which correspondence should be addre Gary Dekan  1303 W Shoshone Ave  Nampa, ID 83651	Secretary of State
5. Name and address for this ackno copy is (if other than # 4 above):	wledgment
	Secretary of State use only
gnature: rinted Name: Gary Dekan apacity/Title: Owner	IDAHO SECRETARY OF STATE  05/09/2014 05:00  CK:CASH CT:158010 BH:142404  16 25:00 = 25:00 ASSUM NAME
gnature: <u>J. Wekan</u> rinted Name:	D171093

Capacity/Title: