



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

**FILED EFFECTIVE**

2007 JUL -9 AM 8:20

SECRETARY OF STATE  
STATE OF IDAHO

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

Image Homes West

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

| Name               | Complete Address               |
|--------------------|--------------------------------|
| <u>Eric J. Lee</u> | <u>2401 S. Apple St. #D101</u> |
|                    | <u>Boise, ID. 83706</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:

Eric Lee  
2401 S. Apple St. #D101  
Boise, ID 83706

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

Eric Lee  
\_\_\_\_\_  
\_\_\_\_\_

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):

336-3817

Signature: Eric Lee  
(signature required)

Printed Name: Eric Lee

Capacity/Title: Sole Proprietor

(see instruction # 8 on back of form)

Secretary of State use only

g:\compform\idaho\form\idaho.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
07/09/2007 05:00  
CX: 255339 CT: 158810 BH: 1064454  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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