

## CERTIFICATE OF ASSUMED BUSINESS NAME



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

MR MAR - 1 ALT 8:57

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the u business is:      Peters Upright Drywal	1
The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> Corey W. Peters	s) of the entity or individual(s) doing ne: <u>Complete Address</u> <u>Rt. 1 Box 57 Marsing Id., 83639</u>
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Corey W. Peters  Rt. 1 Box 57  Marsing, ID., 83639	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above):</li> </ol>	t Phone number (optional): (208) 896-5359
Printed Name: Corey W. Peters  Capacity: Owner  (see instruction #8 on back of form)	Secretary of State use only  Secretary of State use only  IDAHO SECRETARY OF STATE  O3/01/2002 05:00  CK: 2379 CT: 158847 BH: 449268  1 6 20.88 = 28.86 ASSUM NAME # 2
or back or form)	D52519