

Capacity/Title: OWNER.

(see instruction #8 on back of form)

## **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. 02 DEC 11 PH 2: 05

MARINE CONTROL STATE

business is: PRO COAT PAINTING	
	e entity or individual(s) doing  Complete Address  SOLD QUARRY  SE 10
8	3709
<ul> <li>The general type of business transacted under th</li> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Manufacturing</li> <li>Transportation and F</li> <li>Construction</li> <li>Agriculture</li> <li>Mining</li> </ul>	
Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:	Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West
355 OLD QUARRY Boise 10 83709	PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgment copy is (if other than # 4 above):</li></ol>	Phone number (optional):  (208) 318 0202
26	Secretary of State use only
nature:	IDAHO SECRETARY OF STATE 12/11/2002 05:00 CK: 783 CT: 158010 BH: 658777

IDAHO SECRETARY OF STATE
12/11/2002 05:00
CK: 783 CT: 158818 BH: 658777
8 28.68 = 28.68 ASSUM NAME # 2