

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

## FILED EFFECTIVE

11 JAN -5 AM 8: 28

## Please type or print legibly. Instructions are included on back of application.

SECFLIBRY OF STATE

	OTAL OF IDAHO
1. The assumed business name which the unders	signed use(s) in the transaction of
business is:	11
Pro Tech Wel	dina
	J
2. The true name(s) and <u>business</u> address(es) of	the entity or individual(s) doing
business under the assumed business name:	Occasion Address
Name	Complete Address
David J. Albizo	1226 Caldwell 151Vd.
	Vampa ID 83651
7. The manual time of business transported and a	the consumed hypinese name in:
3. The general type of business transacted under	
Retail Trade Transportation an	d Public Utilities
Wholesale Trade Construction	
☐ Services ☐ Agriculture	Submit Certificate of
Manufacturing	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Sacratary of State
correspondence should be addressed:	Secretary of State 450 North 4th Street
David 1 Alhiza	PO Box 83720
1226 Coldwell Blod	Boise ID 83720-0080
Nama ID 83651	208 334-2301
<ol><li>Name and address for this acknowledgment copy is (if other than # 4 above):</li></ol>	
Same	
Salle	
	Secretary of State use only
Signature: (1810) (1. (CO))	
Printed Name: David J. Albizo	
Capacity/Title: OWNET	
Signature:	
Printed Name:	IDANO SECRETARY OF STATE
Capacity/Title:	01/05/2011 05:00 CK: 4648 CT: 158016 BH: 1253774 1 0 25.00 = 25.00 05510 None: 2

abn.pmd Rev. 07/2010