TIVE



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. STATE OF IDAHO

NOTE: See instructions on re-	
1 to the undersigned	tuse(s) in the transaction of
1. The assumed business name which the undersigned use(s) in the transaction of	
business is:	
business is: REMODEL AMERICA	
ning (a) doing	
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
ELIC B PETERSEN 5738	CHINDEN BLUD
BUST	- 10 83714
	assumed business name is:
3. The general type of business transacted under the assumed business name is:	
☐ Retail Trade ☐ Transportation and Pu	ublic Utilities
Retail Trade	
Wholesale Hade Agriculture	Submit Certificate of
☐ Services ☐ Agriculture	Assumed Business
Manufacturing Mining	Name and \$20.00 fee to:
Finance, Insurance, and Real Estate	Tanno and 4-11
	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
ELIC B PETERSEN	PO Box 83720 Boise ID 83720-0080
5238 CHINDEN BUD	208 334-2301
5250 CHIVELI 3	208 334-2001
BOISE 11) 0011	The second of (actional).
Name and address for this acknowledgment	Phone number (optional):
copy is (if other than # 4 above):	
COPY 13 (II Other than in 1 assess)	
	Secretary of State use only
	,
Signature: (sbnature required)	
Signature:	IDAHO SECRETARY OF STATE 09/26/2002 05:00
Printed Name: ENC B PETERS TO SEE SE	CK: 2149 CT: 161897 BH: 498338
Signature:	1 @ 20.06 = 20.00 ASSUM NAME # 2
(see instruction #8 on back of form)	~ 1

D 58604