CERTIFICATE OF ASSUMED BUSINESS NAME FILED (Please type or print legibly. See instructions on reverse.)		
То	the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the unders gives notice of adoption of an Assumed Business Na	ame.
1.	The assumed business name which the undersigned us business is: Custom Painting	BECRETARY OF STATE PROBLEM OF STATE PROB
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address		
		Loise 8370
3.	The general type of business transacted under the assu (mark only those that apply)	med business name is:
	☐ Wholesale Trade ☐ Agriculture ☐ Fin ☐ Services ☒ Construction ☐ Min	ansportation and Public Utilities ance, Insurance, and Real Estate ning
4.	The name and address to which future Phone numbe correspondence should be addressed:	r (optional): 345-2427
	Brise, ID 83702	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	2862	Secretary of State use only IDAHO SECRETARY OF STATE 01/29/1998 69:00
Signatu		1 0 20.00 = 20.00 ASSUM NAME
	ty: Owner (see instruction # 8 on back of form)	011692