



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

01 AUG -5 PM 2:30
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

K and R Stucco

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

Keith Allen Leininger (1) P.O. Box 104, Paul Idaho
Robyne K. Leininger (2) 3216 West Clark, Paul Idaho
mailing, physical 83347

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

K and R Stucco
P.O. Box 104
Paul Id 83347

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

(208) 438-2503 4115

Secretary of State use only

Signature: Keith Allen Leininger

Printed Name: Keith Allen Leininger

Capacity: OWNER

(see instruction # 8 on back of form)

gc:corpformstabn.ps5
Revised 01/2001

IDaho SECRETARY OF STATE
08/07/2001 05:00
CK: 1119 CT: 149731 BH: 411985
1 # 20.00 = 20.00 ASSUM NAME # 2

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