



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

Please type or print legibly.

Instructions are included on back of application.

2013 OCT -3 PM 4:53

SECRETARY OF STATE
STATE OF IDAHO

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

Professional Building Contractors

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>David Palmer</u>	<u>2659 S Stonehedge Dr</u>
<u>Tylynne Palmer</u>	<u>Nampa ID 83686</u>

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:

2659 S Stonehedge Dr
Nampa ID 83686

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Secretary of State use only

Signature: David Palmer

Printed Name: David Palmer

Capacity/Title: Owner

Signature: Tylynne Palmer

Printed Name: Tylynne Palmer

Capacity/Title: Owner

IDAHO SECRETARY OF STATE
10/04/2013 05:00
CK: CASH CT: 150010 DH: 1392711
1 @ 25.00 = 25.00 ASSUM NAME # 2

D166191