

## **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.

## FILED EFFECTIVE

2008 MAY 20 PM 3: 47

SECRETARY OF STATE STATE OF IDAHO

T & C Exter	rior Design
2. The true name(s) and business address(es) business under the assumed business name Name  Jarret Thompson  Shane Cope  3. The general type of business transacted under the assumed business address(es) business address(es) business address(es) business address(es) business name of the same o	Complete Address 609 E. 13th Ave., Post Falls, ID 83854 9317 Crabapple Court, Hayden, ID 83835
	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse 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:	D121995
Tillied Ivallie.	IDAHO SECRETARY OF STATE
Capacity/Title: Partner (see instruction # 8 on back of form)	6 05/20/2008 05:00 6 CK: 113250 CT: 172699 BH: 11168 1 2 25.88 = 25.86 ASSUM MARE