



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.

Instructions are included on back of application.

2016 SEP -1 AM 9:41

SECRETARY OF STATE
STATE OF IDAHO

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

SCHOTTIS 2 U Custom Coatings

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>Bobby Schottenbauer</u>	<u>153 Elk Creek Rd.</u>
<u>Tammy Schottenbauer</u>	<u>Kellogg, ID. 83837</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 | |

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

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

Robert & Tammy Schottenbauer
153 Elk Creek Road
Kellogg, ID. 83837

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

Signature: Robert Schottenbauer

Printed Name: Robert Schottenbauer

Capacity/Title: owner

Signature: Tamara Schottenbauer

Printed Name: Tamara Schottenbauer

Capacity/Title: owner

Secretary of State use only

IDAHO SECRETARY OF STATE

09/01/2016 05:00

CK:3042 CT:328543 BH:1544457

1@ 25.00 = 25.00 ASSUM NAME #2

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