21		
	CERTIFICATE OF ASSUMED BUSINESS	
	Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed E	ne undersigned
Disease time as arist leadby		
Instructions are included on back of application. STATE OF IDAHO		
 The assumed business name which the undersigned use(s) in the transaction of business is: 		
Bermudez Roofing		
2. The t busin	rue name(s) and <u>business</u> address(es ess under the assumed business nan <u>Name</u> uardo Bermudez Ornelas	
<u>_EQ</u>	dardo Bermudez Orneras	
	· · · · · · · · · · · · · · · · · · ·	
	general type of business transacted ur	
4. The r	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate name and address to which future spondence should be addressed:	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street
	do Bermudez Ornelas Disney Dr. Idaho Falls Id. 83404	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name	e and address for this acknowledgmer	nt
	IS (if other than # 4 above).	
		Secretary of State use only
Signature: <u>Eduardo Bermudez</u> Ornelas Capacity/Title: <u>OWNER</u> Signature:		
Printed Nam	ne:	IDAHO SECRETARY OF STATE 1040 SECRETARY OF STATE 105/17/2012 05:00 CK: 1072 CT: 270519 BH: 1324638 1 9 25.00 = 25.00 ASSUM NAME # 2
	abn.pmd Rev. 07/	DL55655

1. 1. 1.