FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

2010 JUN -4 PM 4: 97

	Pursuant to Section 53-504, Idaho submits for filing a certificate of As	Code, the undersi- sumed Business N	(A)/7 (ii)	STATE
N	Please type or print leg IOTE: See instructions on revers		STATE OF 10	
1. The busin	assumed business name which	the undersigned	d use(s) in the transaction o	of .
	meridian 24hr Lock	3 key Lo	cksmith Service	
2. The busir	true name(s) and business addr ness under the assumed busine	ess(es) of the e ss name	ntity or individual(s) doing	And the state of
_	Name !	oo nama.	Complete Address	
	arlos Williams	1170		21
	100 101 101100110	— — — — — — — — — — — — — — — — — — —	N Liberty #3	124
			1015e, la 18370	4
3. The g	general type of business transac	ted under the a	ssumed business name is:	
	Wholesale Trade 🔲 Constru		lic Utilities	
	Services Agricult	:ure	Submit Certificate of	
	Manufacturing	İ	Assumed Business	
	Finance, Insurance, and Real E	state	Name and \$25.00 fee to:	İ
4. The n	ame and address to which futur	e	Idaho Secretary of State	
corres	spondence should be addresised	1:	450 N 4th Street PO Box 83720	
112	9 N. Liberty St # 33	.,	Boise ID 83720-0080	
	218e, Idaho 83704		(208) 334-2301	
	130 1 100 0 100 1		(200) 00-1 2001	
				-
5. Nam	e and address for this acknowle	dgment		
сору	iS (# other than # 4 above).			
***************************************			Secretary of State use only	I
***************************************	l			e e e e e e e e e e e e e e e e e e e
Signature:	Carlos Willeria	gd udels		
	(signature recurred)	g.hcom/formstabn formstabn p85		Ÿ
	e: Carlos Williams	formstabn form	IDAHO SECRETAR	V 00 press
Capacity/Title: O(1)(14)				
•	(see instruction # 8 on back of form)		1 8 25.00 = 25.00	ASSUM HOME #
		!		

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