



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

The Masters Touch Drywall

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

Name

Complete Address

DANIEL L. GARDNER SR

833 FILER AVE Twin Falls Id 83301

William S. Gardner

833 FILER AVE Twin Falls Id 83301

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☐

Services

☒

Construction

☐

Mining

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

Phone number (optional): (208) 736-4903

The Masters Touch Drywall

833 FILER AVE.

Twin Falls, Id. 83301

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature:

Daniel L. Gardner Sr.

Printed Name:

DANIEL L. GARDNER SR.

Capacity:

GENERAL PARTNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/17/1998 09:00
CK: 1291 CT: 106873 BH: 162154

1 @ 20.00 = 20.00 ASSUM NAME # 2

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