FILED EFFECTIVE



## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2010 AUG 23 PM 4: 22 SECRETARY OF STATE STATE OF IDAHO Please type or print legibly.

Instructions are included on back of application.

CSIIN, Inc.		
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:		
Name	Complete Address	
Sasa and Issa, Inc.	213 12th Ave. North, Buhl, ID 83316	
C185502		
	sacted under the assumed business name is:	
	sportation and Public Utilities	
	struction	
	Submit Certificate of	
Manufacturing Minir	Assumed Business	
Finance, Insurance, and Rea	al Estate Name and \$25.00 fee to:	
The name and address to which fu	uture Secretary of State	
correspondence should be addres	Cecletaly of Clare	
Sasa Cvjetkovic	PO Box 83720	
213 12th Ave. North	Boise ID 83720-0080 208 334-2301	
Buhl, ID 83316	200 304-230 1	
Name and address for this acknow	vledgment	
COPY IS (if other than # 4 above).	~	
	Secretary of State use only	
ature: SAM CVICTAOVIC	·	
ed Name: Sasa Cvjetkovic		
acity/Title:	<u> </u>	
	i e e e e e e e e e e e e e e e e e e e	
ature:		
ed Name:	IDAHO SECRETARY OF STATE	

CK: 499940 CT: 172099 BH: 1235964 1 8 25.00 = 25.00 ASSUM NAME #, 2