(see instruction # 8 on back of form)



## **CERTIFICATE OF** ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filling a certificate of Assumed Business Name.

FILED EFFECTIVE

2008 MAR 12 AHII: 88

SEURE PARY OF STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

Calibre H	Home Inspections
The true name(s) and business address( business under the assumed business name	(es) of the entity or individual(s) doing ame:
Name	Complete Address
Tim Canaday	800 N Substation Rd.
Melissa Canaday	800 N Substation Rd.
The general type of business transacted  Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat The name and address to which future correspondence should be addressed:  Tim Canaday  800 N Substation Rd.	Submit Certificate of Assumed Business
Emmett Id 83617  Name and address for this acknowledge copy is (if other than # 4 above):	ment
	Secretary of State use only
ed Name: 15 m Canadax	Secretary of Sta

03/12/2008 05:00 CK: 1495219 CT: 172099 BH: 1104221 1 8 25.00 = 25.00 ASSUM NAME # 2