| 227 | | |
|---|---------------|--|
| CERTIFICATE OF | - | FILED EFFECTIVE |
| ASSUMED BUSINESS | 5 NAMI | E 12 FEB 15 AM 9:04 |
| Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed E | | me |
| Please type or print legibly. | DUSHIESS INdi | SECRETARY OF STATE State of Idaho |
| instructions are included on back of ap | olication. | STATE OF DAHO |
| 1. The assumed business name which the undersigned use(s) in the transaction of business is: LAKEVIEW HOME IMPROVEMENT | | |
| 2. The true name(s) and <u>business</u> address(ex business under the assumed business nar <u>Name</u> David Smitth | ne: | ntity or individual(s) doing <u>Complete Address</u> W. SPIRIT LAKE RD |
| MELANIE SMITH | | LAKE 10 83869 |
| | | / |
| Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: DAVID Smith 77/2 W. SPIRIT SPIRIT LAKE, ID SPIRIT LAKE, ID | r r | lic Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgme copy is (if other than # 4 above): | nt | |
| | | Secretary of State use only |
| Signature: | | |
| Signature: | | IDAHO SECRETARY OF STATE |
| Printed Name: | | 02/15/2012 05:00 CK: 2072 CT: 158810 BH: 1319766 |
| Capacity/Title: | | 1 8 25.00 = 25.88 ASSUM HAHE # 2 |
| abn.pmd Rev.07 | //2010 | D153341 |