

Capacity/Title: Manager

Signature: _

Printed Name: _ Capacity/Title:__

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

2012 JUL 26 PM 2: 04

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

Les' Quality Reofing	
The true name(s) and <u>business</u> address(es) business under the assumed business name	
<u>Name</u>	Complete Address
LESCO Enterprises, LLC.	300 Krahn Lane, McCall, Idaho 83638
W41875	
The general type of business transacted under Retail Trade Transportation	der the assumed business name is: and Public Utilities
Wholesale Trade Construction	
Services Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25,00 fee to:
The name and address to which future	
correspondence should be addressed:	Secretary of State 450 North 4th Street
Les' Quality Roofing	PO Box 83720
P.O. Box 2663	Boise ID 83720-0080
McCall, ID 83638	208 334-2301
Name and address for this acknowledgment	
COPY IS (if other than #4 above):	* The second of
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IDAHO SECRETARY OF STATE 107/26/2012 05:00 CK: 1076200 CT: 172099 BH: 1333573 1 0 25.00 = 25.00 ASSUM HAME # 3

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