



# CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE**

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

10 NOV -2 AM 11:44

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

 SECRETARY OF STATE  
 STATE OF IDAHO

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

Cobb Home Services

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

Name

Troy D. Cobb

Complete Address

226 S. Philippi St.

Boise ID. 83705

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input checked="" type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input type="checkbox"/>	Finance, Insurance, and Real Estate		

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

Troy Cobb

226 S. Philippi St.

Boise Id 83705

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

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

Signature: Troy D. Cobb

Printed Name: Troy D. Cobb

Capacity/Title: Sole proprietor

Signature: Troy D. Cobb

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

11/02/2010 05:00  
 CK: 1443 CI: 150610 BH: 1245599  
 1 @ 25.00 = 25.00 ASSUM NAME # 2