

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFE

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

Please type or print legibly.

NOTE: See instructions on reverse before fillr	<b>19.</b> δλεξότην ζηδι
The assumed business name which the undersign business is:	
ROCKWell Custon	m DRYWalling
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Lalan Hawlanson  Corry Fox  Joseph Santos  614	Complete Address  OI Maple Feldw Fall, ID  FILL PRIVE 2001, Shelly 10 83
3. The general type of business transacted under th	ne assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  MANGEMENT AND STA	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (108) 100-7687
	Secretary of State use only
Signature: Juna Hawlann &	D167541

Printed Name: <

(see instruction # 8 on back of form)

Capacity/Title:

IDAHO SECRETARY OF STATE

01/25/2007 05:00

CK: 56294704004 CT: 158010 BH: 1028683
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