## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an Assumed B	susiness Name
1.	The assumed business name which the undersigned use(s) in the transaction of a state of the stat	
	pedro Avalos S	Stucco Stucco
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Name 192	Complete Address
	eald	well FD 8360S
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	□ Retail Trade □ Manufacturing □   □ Wholesale Trade □ Agriculture □   □ Services ⋈ Construction □	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future Phone number (optional): 208) 459-284 correspondence should be addressed:	
	Same #20	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720

Signature: Lelso Mua

Printed Name: 1000 AVALOS

Capacity:

(see instruction # 8 on back of form)

Boise ID 83720-0080 208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

10/23/2000 09:00 CK: NO CHECK # CT: 137533 BH: 356158

1 0 20.00 = 20.00 ASSUM NAME # 2

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