

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2003 MAR i 7  $\,$  AM IO: 08 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

NAGL	CARPENTRY		
The true name(s) and business address business under the assumed business named business na	es) of the entity of ame:	r individual(s) doing	
Name	Complete Address		
TRAVIS NAGLE	214 S. 13th	214 S. 13th Street, St. Maries, ID 83861	
The general type of business transacted	under the assume	ed business name is:	
Retail Trade Transportat Wholesale Trade Construction	ion and Public Util n	lities	
Services Agriculture	Su	bmit Certificate of	
☐ Manufacturing ☐ Mining	•	sumed Business	
Finance, Insurance, and Real Esta	te Na	ame and <b>\$20.00</b> fee to:	
4. The name and address to which future		ecretary of State	
correspondence should be addressed:		0 West Jefferson	
·		sement West	
Nagle Carpentry	- 1	D Box 83720	
214 S. 13th Street, St. Maries, ID 83861		ise ID 83720-0080 8 334-2301	
5. Name and address for this acknowledg	- ment Pho	ne number (optional):	
COPy is (if other than # 4 above):	_	208-245-6965	
same as above		Secretary of State use only	
	-	and the second	
$\bigcirc$ 17/ $^{\prime}$	- 86		
Signature:	12002		
Printed Name: Travis Nagle	ghorr/Vormsubn formisubn p65 Revised 09/2002		
Capacity/Title:owner	corpto	IDAHO SECRETARY OF	
(see instruction # 8 on back of form)	- [&	03/17/2003 : CK: 1709 CT: 158010   1 0 20.00 = 20.00 AS	

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