

Printed Name: Leonardo

(see instruction # 8 on back of form)

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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



1. The assumed business name which the undersign business is:	ned use(s) in the transaction of	
Leo's Wall covering		
 The true name(s) and <u>business</u> address(es) of the business under the assumed business name: 	e entity or individual(s) doing	
<u>Name</u>	Complete Address	
Leonardo Anguiano 2711	S. Chestnut St. Nampo	∟ 83¢e –
3. The general type of business transacted under the	e assumed business name is:	
☐ Retail Trade ☐ Transportation and P☐ Wholesale Trade ☐ Construction	ublic Utilities	
Services Griculture	Submit Certificate of	
☐ Manufacturing ☐ Mining	Assumed Business	
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:	
4. The name and address to which future	Secretary of State	
correspondence should be addressed:	700 West Jefferson	
Λ .	Basement West	
Comardo Anguiano	PO Box 83720	
2711 S. Christnut St.	Boise ID 83720-0080 208 334-2301	
Nampa ID. 83686	200 001 2001	
5. Name and address for this acknowledgment	Phone number (optional):	
COPY is (if other than # 4 above):	(208)4(05-5027	
	Secretary of State use only	
	•	
nature: Monardo Manuero 2002	TDAHO SECRETARY OF STATI	-

g:\corp\forms\abn forms\a Revised 04/2003

IDAHO SECRETARY OF STATE

10/17/2005 05:00

CK: 1016 CT: 158010 BH: 917335

25.00 = 25.00 ASSUM NAME # 2

D92693