

# 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 Business Name.

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

ACTION PAINTING SERVICE

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

STEVE CLEMONS

Complete Address

P.O. Box 201

COCOAUA, ID 83813

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

☐ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☐ Services

☒ Construction

☐ Mining

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

Phone number (optional): \_\_\_\_\_

STEVE CLEMONS

P.O. Box 201

COCOAUA, ID 83813

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

SAME

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: Steve Clemons

Printed Name: STEVE CLEMONS

Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/02/1998 09:00

CK: 3740069691 CT: 106171 BH: 158115

1 @ 20.00 = 20.00 ASSUM NAME # 2

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