

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2014 SEP 30 AM 8: 54

SECRETARY OF STATE STATE OF IDAHO

1)114039

## Please type or print legibly. instructions are included on back of application.

Finestra Glass Services	
The true name(s) and <u>business</u> address business under the assumed business r	
Name	Complete Address
F.G.S. Inc.	117 Wanders Way Ketchum , ID 83340
<u> </u>	
3. The general type of business transacted	under the assumed business name is:
	tion and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
Manufacturing Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Esta	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Finestra Glass Services	PO Box 83720 Boise ID 83720-0080
P.O. Box 1780	208 334-2301
Ketchum, ID 83340	
<ol><li>Name and address for this acknowledge copy is (if other than # 4 above);</li></ol>	nent
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//-K	Secretary of State use only
ignature:	_
rinted Name; Daniel Bertuzzi	_ IDAHO SECRETARY OF STATE _ 09/30/2014 05:00
apacity/Title: Owner	CK:1270 CT:301674 BH:14433
	10 25.00 = 25.00 ASSUM NAME

abn.pmd Rev. 07/2010

Printed Name:

Capacity/Title:\_