

Capacity/Title:_

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.

10 AUG -9 AM 8: 50

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

SECRETARY OF STATE STATE OF IDAHO

R & R Custom Pools	
The true name(s) and <u>business</u> address(es business under the assumed business nam Name Castle Construction LLC W 26 771) of the entity or individual(s) doing ne: <u>Complete Address</u> 5615 Castle Heights Drive, Caldwell, ID 83607
The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Ronal D Reed 5615 Castle Heights Drive	Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Caldwell, ID 83607 Name and address for this acknowledgment copy is (if other than # 4 above):	nt
	Secretary of State use only
ed Name: Ronal D Reed	
acity/Title: Owner	
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ted Name:	CK: 12270 CT: 158010 BH: 1 0 25.00 = 25.00 ASSUM

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