

Signature:_

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2695 FEB 22 ANIO: 37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

. The assumed business name which the undersign business is: TIMBER LINE CUSTOM	gned use(s) in the transaction of
The true name(s) and business address(es) of the business under the assumed business name: Name MATTHEW DAUGHTRY	ne entity or individual(s) doing Complete Address Rex 3236 HATEY D. 833
3. The general type of business transacted under the	ne assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Po Box 3236 ANEY ID 83333	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above).	Phone number (optional):
	Secretary of State use only

IDAHO SECRETARY OF STATE

102/22/2006 05:00

1133 CT: 158010 BH: 938947

125.00 = 25.00 ASSUM NAME # 2

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