	CERTIFICATE OF ASSUMED B	BUSINESS NAME
(Please type or print legibly. See instructions on reverse.) (Please type or print legibly. See instructions on reverse.) (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.	1. The assumed business name which the undersigned use(s) in the transaction of business is:	
	GARCIA Brothe	ers Concretion
		7
2.	t. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Name Name	Complete Address
	Eduardo Garcia 1458 Ph	8-34
	Mauricio Garcia 1720 S.	Johns # 19 Emmet, 10
3.	The general type of business transacted under the a (mark only those that apply)	assumed business name is:
	Retail Trade Manufacturing	Transportation and Public Utilities
	☐ Wholesale Trade ☐ Agriculture ☐	Finance, Insurance, and Real Estate
	Services Construction	Mining
4.	4. The name and address to which future Phone number (optional):	
	correspondence should be addressed:	
	1458 Phillips	Submit Certificate of
	Emmet, 10 83617	Assumed Business Name and \$20.00 fee to:
		Sparotony of State
_		Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgment COPY is (if other than # 4 above):	Basement West PO Box 83720
	COPY 13 (ii other than # 4 above).	Boise ID 83720-0080
		208 334-2301
		Secretary of State use only
		IDAHO SECRETARY OF STATE
Signature: Educado Goreso T Mayne (10 Cheris CK: 146 CT: 133864 BH: 338598		
Signature: Educado Goresto T Maynullo Cherita CK: 146 CT: 133864 BH: 338598 Printed Name: Educado Garcia, Maynullo Cherita CK: 146 CT: 133864 BH: 338598 1 2 28.66 = 28.66 ASSUM NAME 1 2 Capacity: (see instruction # 8 on back of form)		
Capacity:		
Capacity:		