

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate

Busines	s Name.
Please type or print legibly	non May 26 AM 9: 12
NOTE: See instructions on reverse before filin	α.
1. The assumed business name which the undersign business is: Tradl Mark Siding	ned use(s) in the transaction of
The true name(s) and <u>business</u> address(es) of the business under the assumed business name:	e entity or individual(s) doing
Aurin S. Colwes 94- Robb Sabrowshi 256 Post	Falls ID 83854
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Services Agriculture	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Aurin Colwes 9475 N. Hwy 41 Post Falls ID 83854	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): 203-704-3242
590	Secretary of State use only

COPY IS (if other than # 4 above). Signature: Printed Name: Hurin Capacity/Title: (see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

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