A CONTRACTOR	CERTIFICATE OF		FILED/EFFECTIVE
	ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned		
	submits for filing a certificate of Assumed Bu	siness Na	ame
   <u>N</u>	Please type or print legibly. OTE: See instructions on reverse befor	e filina.	SECLALIARY OF STATE STATE OF IDAHO
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> </ol>			
	Elite Concrete	Sta,	hing & Engraving
<ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:</li> </ol>			
		Complete Address	
Phil Schlader		$\frac{216}{E} = \frac{34}{STr}$	
	Trudy Schlader	/	Meridian, ID 836412_
<ol> <li>The general type of business transacted under the assumed business name is:</li> </ol>			
Retail Trade Transportation and Public Utilities			
Wholesale Trade Construction			
	Services Agriculture		Submit Certificate of
	Manufacturing Mining Finance, Insurance, and Real Estate		Assumed Business Name and <b>\$20.00</b> fee to:
	name and address to which future		Secretary of State
	spondence should be addressed:		700 West Jefferson Basement West
Elite	e Concrete Staining & Engraving		PO Box 83720 Boise ID 83720-0080
	Meridian, ID 83642		208 334-2301
5. Name and address for this acknowledgment Phone number (optional):			
copy	/ İS (if other than # 4 above):		208-288-5797
		·····	
		S	Secretary of State use only
Signature: R. Schladen		g.tcorptformstabn formstabn.p65 Revised 01/2001	D54039
Printed Name: Phil Schlader			IDAHO SECRETARY OF STATE
Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)		g:\corptfe Re	24/17/2002 05:00 CK: CASH CT: 158016 BH: 459748 1 20 09 00 00 00 00 00 00 00 00 00 00 00 00

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