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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly. Instructions are included on back of appl	e undersigned usiness Name. STATE OF IDAHO
The assumed business name which the undersigned use(s) in the transaction of business is: <u>GREYSTBUE_FINISHES</u>	
3. The general type of business transacted une	e: <u>Complete Address</u> <u>1386 W. SUTHERLAND CH.</u> <u>HAYDEN ID, 83835</u> der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: <u>Sappe</u> Printed Name: <u>BECKY</u> <u>TAPPER</u> Capacity/Title: <u>OWNER</u> Signature: Printed Name:	Secretary of State use only IDAHO SECRETARY OF STATE 04/19/2017 05:00 CK:2517 CT:338241 BH:1573949 16 25.00 = 25.00 ASSUM NAME #
Capacity/Title:	1) 193 801

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