



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned  
submits for filing a certificate of Assumed Business Name.

**FILED EFFECTIVE**

03 JUL -7 PM 1:27

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Knight's Quality Glass

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Jon Knight

1025 Clarene St. Meridian, Id 83642

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade          | <input type="checkbox"/> Construction                        |
| <input checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

4. The name and address to which future correspondence should be addressed:

Jon Knight

1025 Clarene St.

Meridian, Id. 83642

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Phone number (optional):

208-888-7471

Signature: Jon Knight

Printed Name: Jon Knight

Capacity: Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/08/2003 05:00  
CK: 1117 CT: 158810 BH: 689822  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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Revised 01/2001

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