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## CERTIFICATE OF ASSUMED BUSINESS NAME

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

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFICTIVE

2006 MAR -2 PM 1: 18

SECRETARY SAID STATE OF WARD

rooms finished co.	
The true name(s) and business address(es) of business under the assumed business name:     Name     Mikel Turner	f the entity or individual(s) doing  Complete Address  920 E 2nd St
	Emmett, Id 83617
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  rooms finished co.  920 E. 2nd st.	
Emmett, Id 83617  5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-850-6070
ignature:  (Signature required)  Frinted Name:  Mikel Turner	Secretary of State use only  Secretary of State use only  DAHO SECRETARY OF STATE  3/02/2006 95:6  CK: 741838 CT: 172699 BH: 94
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