

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. NOTE: See instructions on reverse before filing.



1. The assumed business name which the undersigned business is: KENS PIANO Sales a SERVI	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Kenneth A. Davis 565	entity or individual(s) doing Complete Address Butte Dr. Tww Falls Id. 8334
3. The general type of business transacted under the	
Wholesale Trade Construction 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: 565 Butte DR. Twin Falls Idn. 8330/	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: AEMIL (signature required) Printed Name: KENNETH ADAUS Capacity/Title: Owner	IDAHO SECRETARY OF STATE ②フ/11/2003 05:00 CK: 18746 CT: 158810 BH: 698568 1 0 25.80 = 25.80 ASSUM MANE # 2

067005