

Printed Name:

Capacity/Title:\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 007 JUL 11 AM 8: 34

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: **Envision Countertops** 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 Envision Cabinet: & Design LLC office. 750 W. 100 S. Blackfoot ID 83221 Shop address: 9N 580W Black 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West Envision Countertops** PO Box 83720 750W. 100S, Boise ID 83720-0080 208 334-2301 Blackfoot ID 83221 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than #4 above). Secretary of State use only Signature:\_\_\_\_

Matthew D. Beard

Manager

(see instruction #8 on back of form)

IDAHO SECRETARY OF STATE 07/11/2007 05:

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