

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

10 NOV 12 AM 8:50

SECRE ARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

The assumed business name which the business is:	e undersigned use(s) in the transaction of
GALLOWAY CONS	STRUCTION & LANDSCAPING
The true name(s) and <u>business</u> addres business under the assumed business <u>Name</u>	name:
DONALD GALLOWAY	Complete Address
DONALD GALLOWA!	484 E VALLEYVIEW DR GENESEE ID 83832
3. The general type of business transacte	ed under the assumed business name is:
Wholesale Trade Construct	
	Submit Certificate of
<u> </u>	Assumed Business
☐ Finance, Insurance, and Real Es	Name and \$25.00 fee to:
4. The name and address to which future	
correspondence should be addressed:	450 North 4th Street
DONALD GALLOWAY	PO Box 83720 Boise ID 83720-0080
484 E VALLEYVIEW DR	_ 208 334-2301
GENESEE ID 83832	
5. Name and address for this acknowledg	ıment
COPY is (if other than # 4 above).	
	-
!	Secretary of State use only
ignature Rald Gallavan	
rinted Name: DONALD GALLOWAY	
apacity/Title:	
gnature:	IDAHO SECRETARY OF STATE
rinted Name:	11/12/2010 05:00 CK: 18946261 CT: 150918 RH: 12467
apacity/Title:	1 0 25.80 = 25.08 ASSUM NAME # 3

abn.pmd Rev. 07/2010

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