

Capacity/Title:_

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTEDS

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

?np? APR 25 AM 10: 41

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

Saying ARY OF STATE

	STATE OF IDAHO
1. The assumed business name which the undersigne	d use(s) in the transaction of
business is:	
Wild West Exteriors	
2. The true name(s) and business address(es) of the e	ntity or individual(s) doing
business under the assumed business name:	
Name	Complete Address
wild week Exteriors 1117	N. La Cresta
Sheila D.L. west Caldu	Jell Id 83605
)
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu	blic Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
correspondence should be adultessed.	Basement West
117 N. La Cresta	PO Box 83720
Coldwell Id 83605	Boise ID 83720-0080 208 334-2301
	200 004-2001
Name and address for this acknowledgment	Phone number (optional):
COPy is (if other than # 4 above):	454-5489
!	
	Secretary of State use only
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gnature: L. L. West safe inted Name: The I a L. West	TRAIN CERRETARY OF ATTE
inted Name: The I a L. West	IDAHO SECRETARY OF STATE 04/25/2002 05:00

CK: CASH CT: 158010 BH: 461645 1 0 20.00 = 20.00 ASSUM NAME # 2

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