

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME



Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00

2015 SEP 21 AM 9: 05

	Filling fee. \$25.0	JU.		SE	CRETARY	OF STATE	
1.	The assumed business name which the undersigned use(s) in the transaction of business is AHO						
	Westover Family Construction						
2.	The individual and/or entity	names and business	address	s(es) of those doing busin	ess unde	er	
	the assumed business nar			• •			
	Patrick M Westover	474 S. 2600 W.		Weston	ID	83286	
	(Name)	(Address)	-	(City)	(State)	(Zipcode)	
	(Name)	(Address)		(City)	(State)	(Zipcode)	
	(Name)	(Address)		(City)	(State)	(Zipcode)	
	(Name)	(Address)		(City)	(State)	(Zipcode)	
	Mailing address for future of	correspondence:		ame and address for this upy is (if other than #4):	acknowle	edgment	
	4 S. 2600. W						
	ress) 'eston l	D 83286	(Addres	s)			
(Cit		State) (Zipcode)	(City)	(5	tate)	(Zipcode)	
Pri	nted Name: Patrick M	Westover		Secretary of State us	e only		
Printed Name: Patrick M Westover Signature: Manual			IDAHO SECRETARY OF STATE				
Printed Name:				09/21/2015 05:00 CK:22612206420 CT:158010 BH:1493175 16 25:00 = 25:00 ASSUM NAME #2			
Sig	nature:					ramic #x	
Pri	nted Name:	<u>.</u>		4			
Signature:				D181559			

Rev. 06/2015