



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

1/27 PM 2:26

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Tim's Drywall Repair Services

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

<u>Tim L. Juarez</u>	<u>Name</u>	<u>1216 Shoshone Ave Nampa ID 83651</u>	<u>Complete Address</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input checked="" type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

Tim L. Juarez  
1216 Shoshone Ave  
Nampa ID 83651

5. Name and address for this acknowledgment copy is (if other than # 4 above):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Revision 1/98

Form 100-1000-065  
F100-1000-065

Signature: Tim L. Juarez  
Printed Name: Tim L. Juarez  
Capacity: Owner  
(see instruction # 8 on back of form)

IDaho SECRETARY OF STATE  
01/27/2003 05:00  
CK: CASH CT: 158810 BH: 659281  
1 @ 20.00 = 20.00 ASSUM NAME # 3

D-61884