

Capacity/Title: OUND

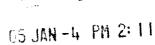
(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



SECRE LAY OF STATE STATE OF IDAHO

The assumed business name which the under business is:      MAXWEW FUMB	(
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:  Name  Name  AMES H. MAXWELL	of the entity or individual(s) doing  Complete Address  3431 N. 33 <sup>RD</sup> STREET, BUISE, FA 837
3. The general type of business transacted unde	or the assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
MAXWELL PLUMBING  2421 V. 33PM STREET  BOISE, ISAHO 83703	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol>	Phone number (optional): (208)424-8303
	Secretary of State use only
Signature: (signature required)  Printed Name: TAMES H. MAXWELL	IDAHO SECRETARY OF STATE  IDAHO SECRETARY OF