

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 50 JUL 13 PH 4: 47

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

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	STATE OF ADARD
1. The assumed business name which the up business is:  B.S. Painting	undersigned use(s) in the transaction of
2. The true name(s) and business address(s) business under the assumed business name  Name  Slover  Slover	es) of the entity or individual(s) doing ame:  Complete Address  945 West 5th North Apt 1456  MIn. Home, ID 83647
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining  Finance, Insurance, and Real Estate	on and Public Utilities n Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledge copy is (if other than # 4 above).</li> </ol>	nent Phone number (optional):
	Secretary of State use only
Signature: Journ Journ  Printed Name: Jevemy Slover  Capacity/Title: Ounce  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### 17/13/2005 05:00  CK: CASH CT: 158010 BH: 821057  1 0 25.00 = 25.00 ASSUM NAME # 2

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