

Capacity/Title:\_\_\_\_

OWNER

(see instruction # 8 on back of form)

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFICATION

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.

KEIM & SONS MASONRY	
2. The true name(s) and business address(es) of business under the assumed business name.  Name  MICHAEL A KEIM	
	er the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson
correspondence should be addressed:  MICHAEL A KEIM  1139 2ND AVE SO.	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above).	
	Secretary of State use only
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IDAHO SECRETARY OF STATE

03/08/2006 05:00

CK: 3670 CT: 158010 BH: 941845

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