



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.

2013 DEC 20 AM 9:21

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

William Thomas (Construction)

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

Name	Complete Address
<u>William L Thomas III</u>	<u>1168 Raven Lane Careywood ID 83809</u>
<u>William L Thomas III</u>	<u>PO Box 394 Careywood ID 83809</u>

3. The general type of business transacted under the assumed business name is:

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

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

William Thomas
PO BOX 394 Careywood
IDAHO 83809

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

Signature: William L Thomas III
 Printed Name: William L Thomas III
 Capacity/Title: Owner / Operator
 Signature: _____
 Printed Name: _____
 Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/20/2013 05:00
CK: 1047906473 CT: 290898 BH: 1402713
1 @ 25.00 = 25.00 ASSUM NAME # 2

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