



CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

02 DEC 10 PM 4: 38

D60452

STATE OF IDAHO submits for filing a certificate of Assumed Business Name.

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

The assumed business name which the undersign business is:	gned use(s) in the transaction of
Rodriguez Roofins	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Salvadol C Rodiguez Nifredo Rodiguez Name 26	Complete Address
3. The general type of business transacted under t	the assumed business name is:
Retail Trade Wholesale Trade Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Salvador Fodragez 2607 Keim LN 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 Phone number (optional): LGL-05-30
	Secretary of State use only
Signature: Salvado (Rodiguez Printed Name: Salvador Rodiguez Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 12/10/2002 05:00 CK: CASH CT: 158010 BH: 650620 1 0 20.00 = 20.00 ASSUM NAME