

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Títle 30, Chapter 21, Part 8, Idaho Code.

2018 APR -2 AM 10: 24

Filing fee: \$25.00.

SECRETARY OF STATE

1.	The assumed business name which the undersigned use(s) in the transaction of business is.					
	Cutting Edge Constrction & Remodeling					
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):					
	Benjamin Luke Porter	201 N 2nd W, Aberdeen ID 83210				
	:Name:	(Address)				
	(Namo)	(Adaress)				
	(Natire)	(Acdress)				
	(Name)	(Address)	<u>.</u> -,			
3.	The general type of business transacted under the assumed business name is:					
	☐ Retail Trade☐ Wholesale Trade☐ Services	☒ Construction☐ Agriculture☐ Manufacturing	Minir	sportation and Public Ung ngince, Insurance, and Re		
4.	Mailing address for future of	correspondence:	5. Name and a copy is (if other	address for this acknov	wledgment	
	Benjamin Luke Porter					
	(Name) 201 N 2nd W		(Name)			
	.nodrese)		(Address)			
	Aberdeen ID 83210	State\ \(\lambda\text{Zipcode}\)	(City)	(State)	(Zipcode)	
Printed Name: Ben L Porter			Secretary of State use only			
	gnature: Bm L Pora					
Printed Name:			IDAHO SECRETARY OF STATE 04/02/2018 05:00 CK:92 CT:355508 BH:1635702 16 25:00 = 25:00 ASSUM NAME #2			
						Signature:
Pr	inted Name:					
Signature:				D201716		

Rev. 08/2015