

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.

Please type or print legibly. NOTE: See instructions on reverse before	SECRETARY OF STATE STATE OF IDAHO
The assumed business name which the under business is: L + L Cond	
The true name(s) and business address(es) of business under the assumed business name: Name	of the entity or individual(s) doing
3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Nampa ID. 83651 5. Name and address for this acknowledgment	PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
nature: Amy A Owen	Secretary of State use only
nted Name: And L O Well pacity/Title: (see Instruction # 8 on back of form)	IDAHO SECRETARY OF STATE

CX: 970801 CT: 172099 BH: 1014648 1 % 25.90 = 25.00 ASSUM NAME # 2

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