



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2017 APR 17 AM 10:01

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

PRO CURBS

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):

NATE EGAN 185 CANYON CREST DR. W. TWIN FALLS ID
(Name) (Address) 83301

SARA EGAN SAME
(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

NATE EGAN
(Name)

185 CANYON CREST DR. W.
(Address)

TWIN FALLS ID 83301
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: NATE EGAN

Signature: Nate Egan

Printed Name: SARA EGAN

Signature: SARA Egan

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/17/2017 05:00

CK:436 CT:158010 BH:1579515

10 25.00 = 25.00 ASSUM NAME #2

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