

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

237	
CERTIFICATE OF ASSUMED BUSINESS NAME 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 filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Celia Caraa Contact Conta	Complete Address 15 Idaho St
3. The general type of business transacted under the Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: CISTOR STATE CONSTRUCTION C	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
pu be 5	Secretary of State use only
Signature: (signature required)	1010
Signature: Printed Name: Joseph Decision Capacity/Title: Joseph Decision Signature required) Capacity/Title: Joseph Decision	IDAHO SECRETARY OF STATE 03/27/2008 05:00 CK: 10119727748 CT: 158010 BH: 1186904 1 9 25.00 = 25.00 ASSUM NAME # 2