



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2005 SEP 16 AM 8:50

SECRETARY OF STATE
STATE OF IDAHO

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:

CUSTOM DRYWALL FINISHING

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

CHRISTOPHER JAMES MICHAEL KELLY

522 RAVEN LANE

P.O. BOX 366

CAREYWOOD, ID 83809

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

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

4. The name and address to which future correspondence should be addressed:

CHRISTOPHER J. M. KELLY

P.O. BOX 366

CAREYWOOD, ID 83809

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

SAME

Signature:

Christopher J. M. Kelly
(signature required)

Printed Name:

CHRISTOPHER JM KELLY

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

(208) 683-9350

Secretary of State use only

091712

IDAHO SECRETARY OF STATE
09/16/2005 05:00
CK: 675989450 CT: 158810 BH: 911994
1 @ 25.00 = 25.00 ASSUM NAME # 2