

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. Instructions are included on back of application.

FILED EFFECTIVE

2015 MAR -4 PM 1: 39

SECRETARY OF STATE STATE OF IDAHO

CFS - Custom Flooring Solutions of Idaho	
2. The true name(s) and <u>business</u> address(es business under the assumed business nam Name CFS - Custom Flooring Solutions of Idaho, LLC	• • •
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture	nder the assumed business name is: a and Public Utilities Submit Certificate of
✓ Manufacturing✓ Mining✓ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: CFS - Custom Flooring Solutions of Idaho 5430 W State Street Boise, ID 83703	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	nt [,]
	Secretary of State use only
rinted Name: H.L. Neef rapacity/Title: CEO	IDANO SECRETARY OF STATE 03/05/2015 05:00 CK:1002 CT:307288 BH:14647
ignature:	16 25.00 = 25.00 ASSUM NAME
Printed Name:	

abn.pmd Rev. 07/2010

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Capacity/Title: