

## 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.

09 OCT 19 PM 12: 37

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is:	signed use(s) in the transaction of
NINE FINGERS SHA	RPENING
The true name(s) and business address(es) of business under the assumed business name:     Name	f the entity or individual(s) doing  Complete Address
David F. Lindsay	2981 Sweetwater
	Boise, Idaho 83716
3. The general type of business transacted under Retail Trade Transportation ar Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
Boise, Idaho 83716	(208) 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):  SAME	
	Secretary of State use only
Signature: ** ** ** ** ** ** ** ** ** ** ** ** **	19440 SECRETARY OF STATE 100/19/2009 05:00 CK: 14369 CT: 158810 BH: 1191714