

CERTIFICATE OF ASSUMED BUSINESS NAME

05 MAY -2 PM 2: 39

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

 The assumed business name which the ur business is: 	ndersigned use(s) in the transaction of
DE LA MODRS DRY	WALL
2. The true name(s) and <u>business</u> address(es business under the assumed business nar Name Name Tamaco La Mora	s) of the entity or individual(s) doing ne: <u>Complete Address</u> <u>327 </u>
<u> </u>	nder the assumed business name is:
 Wholesale Trade Gervices Manufacturing Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: 327 (S+ N) NAMA 10 83687	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	Phone number (optional): 8/8-256-7730
	Secretary of State use only
Signature: Faroco & Campre Printed Name: Faroco & Campre Capacity/Title: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 95/02/2005 05:00 CK: 525925 CT: 172099 BH: 807937 1 0 25.00 = 25.00 ASSUM NAME # 2

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