



**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
2025 MAR 14 PM 9:31

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:

Western States' Contracts R's

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

troy mason
Albert mason
DAVID mason

2856 E. 6271 N. Roberts' Rd
same 83444
same

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	

Submit
Assume
Name a

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

Western States' Contractors
P.O. X 195
Roberts, Ed 83444

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

no

Phone number (optional):

208-580-4421

Secretary of State use only

Signature: 

(Signature required)

Printed Name: Troy Mason

Capacity/Title: Office Manager

(see instruction # 8 on back of form)

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11/04/2005 05:00
CK: 92791520662 CT: 193879 BH: 920520
1 @ 25.00 = 25.00 ASSUM NAME # 2

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