

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTY/E

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

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Please type or print legibly. NOTE: See instructions on reverse before filir	STATE OF IDAHO
1. The assumed business name which the undersign business is:	uned use(s) in the transaction of early and Remodeling
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Chude Stapleton TR  LLoyD Schick	e entity or individual(s) doing  Complete Address
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:  1702 Piney Creek Rd  Nampa ED 83686	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 353-9518
	Secretary of State use only
ignature: (signature required)  rinted Name: Claude Aller Staple to Staple t	IDANO SECRETARY OF STATE

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07/23/2002 05:00

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