

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2004 MAR 24 AM 8: 52

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

1. The assumed business name which the und business is: LEO'S Towing & Auto	dersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name	of the entity or individual(s) doing e: Complete Address PO Box 884 Deiggs Id 83427
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: LEO 5 Trusillo 1R PO Box 984 DR,895 Ed 83422	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	t Phone number (optional): 208-709-1189
	Secretary of State use only
Signature: SEDA Justia (signature required) Printed Name: Lzo 5 Trusillo SR	IDAHO SECRETARY OF STATE 93/24/2004 95:00
Capacity/Title: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 93/24/2004 05:00 CK: 103 CT: 158010 BH: 735106

8/15/03

1 8 25.00 = 25.00 ASSUM NAME # 2