

## 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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

CARLAR 17 PM 1: 47

CAUCHA LA PARTE OF STATE

	STATE OF IDAHO
The assumed business name which the under business is:	
Gabe's Refrigeration Heating	g? Air Conditioning
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:	
<u>Name</u>	Complete Address
Gabriel S. Garcia	768 W. Pams Hill St. Fora, 10 83634
	768 W. Pams Hill St. tona, 10 83634 Kuna, 10. 83634
3. The general type of business transacted under	er the assumed business name is:
Retail Trade Transportation a	nd Public Utilities
Wholesale Trade Construction	
☑ Services ☐ Agriculture	Submit Certificate of
	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
*	Basement West PO Box 83720
76041 Dame HI St.	Boise ID 83720-0080
768 W. Rams Hill 34. Kuna, 10 83634	208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	t Phone number (optional):
	Secretary of State use only
1 1010	D41362
Signature: (signature required)	IDAHO SECRETARY OF STATE
Printed Name: Gabriel S. Garcia	03/17/2004 05:00 CK: 4268 CT: 158010 BH: 733748
Capacity/Title: Owner	음 조 1 8 25.00 = 25.00 ASSUM NAME # 2