227	
CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bus Please type or print legibly. Instructions are included on back of appli	undersigned SECRETARY OF STATE siness Name. STATE OF IDAHO
 The assumed business name which the under business is: C.A.R. MAGIC 	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name <u>Name</u> <u>C.A.R. Magić LLC</u> <u>WI46[8]</u>	of the entity or individual(s) doing e: <u>Complete Address</u> 500 Marjorie Ave. Ammon, Idaho 83401
 3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Finance, insurance, and Real Estate 4. The name and address to which future 	and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
 correspondence should be addressed: 600 Marjorie Ave. Ammon, Idaho 83401 5. Name and address for this acknowledgment 	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
COpy is (if other than # 4 above):	
Signature:	Secretary of State use only
Printed Name: Brandon Bruce Roberts Capacity/Title: President Signature: Automatic Fleese Roberts Printed Name: Hailey Eleese Roberts	IDAHO SECRETARY OF STATE 01/06/2015 05:00 CK:1549 CT:304842 BH:1455817 16 25.00 = 25.00 ASSUM NAME #
Capacity/Title: Vice President	
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