

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 JUL -8 PM 2:10
ersigned

Name: _____
SECRET _____ OF STATE
STATE _____
use(s) in the _____

1. The assumed business name which the undersigned use(s) in the transaction of business is:

HOOP'S CUSTOM EXHAUST

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name
LARRY HOOPER

Complete Address
810^W MAIN ST BURLEY ID 83318

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: _____ Phone number (optional): 678-4667

HOOP'S CUSTOM EXHAUST
LARRY HOOPER
810 W MAIN ST
BURLEY ID 83318

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:

**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):

D. L. EVANS BANK
P.O. BOX 1188
BURLEY, IDAHO 83318

Secretary of State use only

LEAD SECRETARY OF STATE

07/08/1998 09:00
OK: 33430 CT: 101190 DI: 126278

1 @ 23.00 = 23.00 ASSUM NAME

D 16518

Revision 2/97

Signature: 

Printed Name: LARRY HOOPER

Capacity: OWNER

(see instruction # 8 on back of form)