Capacity: OWNER

(see instruction # 8 on back of form)

	RTIFICATE OF ASSUMED (Please type or print legibly. See Institute of the SECRETARY OF STATE, STATE Of Pursuant to Section 53-504, Idaho Co	BUSINESS NAME 16 Tructions on reverse.) STATE OF OF OF OF OR OR OR OR OF THE OF	
1.	gives notice of adoption of an Assum The assumed business name which the	ed Business Name.	
	business is:		
2.	A PLUS RENT A CAR The true name(s) and business address(es) of the entity or individual(s) doing		
	business under the assumed business no Name	ame is/are:	
	CHRISTENSEN BODY SHOP, INC.	Complete Address 210 WEST 4TH SOUTH, REXBURG, ID 83440	
	LEON CHRISTENSEN C 109421	535 TAURUS, REXBURG, ID 83440	
	IREAN CHRISTENSEN	535 TAURUS, REXBURG, ID 83440	
	The general type of business transacted (mark only those that apply) Retail Trade	under the assumed business name is: ing	
4.	The general type of business transacted (mark only those that apply) Retail Trade	under the assumed business name is: ing	
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4. ;	The general type of business transacted (mark only those that apply) Retail Trade	under the assumed business name is: Image: Transportation and Public Utilities Finance, Insurance, and Real Est Mining Phone number (optional): 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 Secretary of State use only	
4.	The general type of business transacted (mark only those that apply) Retail Trade	under the assumed business name is: ing	

1 8 20.00 = 20.00 ASSUM NAME # 2

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