

## 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.

(see instruction # 8 on back of form)

submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SEC. 12 STATE TOAHO

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1. The assumed business name which the undersolution business is:  \[ \tag{\cappa_{\chi} \chi_{\chi} \chi_{\chi}} \] \[ \tag{\chi_{\chi} \chi_{\chi} \chi_{\chi}} \] \[ \tag{\chi_{\chi} \chi_{\chi} \chi_{\chi}} \] \[ \tag{\chi_{\chi} \chi_{\chi} \chi_{\chi} \chi_{\chi}} \]	REPAIR
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Solution P 9	Complete Address 398 MARTINGALR DA.
3. The general type of business transacted unde  Retail Trade  Construction	
<ul> <li>Wholesale Trade ☐ Construction</li> <li>Services ☐ Agriculture</li> <li>Manufacturing ☐ Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  TOR LOPP  9398 MARTINGALC DA  BONSE TO 83709	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):	Phone number (optional):
	Secretary of State use only
inted Name: DwwER	IDAHO SECRETARY OF STATE    IDAHO SECRETARY OF STATE   OB /24/2004 05 = 05