



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

08 DEC 17 AM 10:12

FILED EFFECTIVE  
SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

MOMZ Garage

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

Name

Moms Garage LLC

Complete Address

PO Box 488, Star, ID 83669

(W54044)

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

PO Box 488, Star, ID 83669

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy IS (if other than # 4 above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: 

(signature required)

Printed Name: Tamara A. Sullivan

Capacity/Title: LLC Shareholder /Secretary  
(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE  
12/17/2008 05:00  
CR: 1363 CT: 232312 BH: 1148718  
1 0 25.00 = 25.00 ASSUM NAME # 2

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