



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 NOV -7 AM 8:21

SECRETARY OF STATE
STATE OF IDAHO

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

Arriaga's Auto SALES

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

Name

Alberto R. Arriaga

Complete Address

4506 S. COTTAGE GROVE LN.
NAMPA ID. 83686

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input 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:

Alberto R. Arriaga
4506 S. COTTAGE GROVE LN.
NAMPA ID. 83686

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):

N/A.

Secretary of State use only

Signature: Alberto R. Arriaga
(signature required)

Printed Name: Alberto R. Arriaga

Capacity/Title: President.

(see instruction # 8 on back of form)

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Revised 04/2003

11/07/2008 05:00
IDaho SECRETARY OF STATE
CK: 962682722 CT: 158010 BH: 1143491
1 @ 25.00 = 25.00 ASSUM NAME # 2

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