

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 20 AM 8: 52 submits for filing a certificate of American and Ameri submits for filing a certificate of Assumed Business Name.

Y OF STATE SEUr. Please type or print legibly. Instructions are included on back of application. STATE OF IDAHO

The assumed business name which the ur business is:	ndersigned use(s) in the transaction of
Busted Knuckles G	iarage
2. The true name(s) and <u>business</u> address(establishess under the assumed business name  Name  Varbrough  James Varbrough	
3. The general type of business transacted u  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Public Utilities  Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  Some Varbrough  1007 15th Ave S  Pauette, In 83661	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State use only
Signature:  Printed Name: Tomes Yorbrough  Capacity/Title: Owner mechanic  Signature: James Signature:	IDANO SECRETARY OF STATE 96/20/2012 95:00
Printed Name: Janet L. Varbrough	CK: 204097136386 CT: 271609 BH: 1329034

Capacity/Title: CD - DW nek

CK: 204097136386 CT: 271609 BH: 1329034 1 9 25,00 = 25.00 ASSUM NAME N 2

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