| 227   |   |
|---|---|
| CERTIFICATE OF<br>ASSUMED BUSINESS N<br>Pursuant to Section 53-504, Idaho Code, the<br>submits for filing a certificate of Assumed Busi   | undersigned 20的。11月28 部 9:22  |
| <u>Please type or print legibly.</u><br>NOTE: See instructions on reverse before  | ATE .   |
| <ol> <li>The assumed business name which the undersigned use(s) in the transaction of<br/>business is:</li> </ol>   |   |
| MAGOOZ Castons  |   |
| <ol> <li>The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing<br/>business under the assumed business name:</li> </ol>   |   |
| Name  | Complete Address  |
| Tim K.M. Cars   | 6492 E Williams 83001   |
| KARRA LUKE  | 6492 E Williams 83001   |
|   | Attal ID 8399   |
| 3. The general type of business transacted under the assumed business name is:  |   |
| Retail Trade     Transportation ar     Wholesale Trade     Construction     Services     Agriculture     Manufacturing     Mining     Finance, Insurance, and Real Estate 4. The name and address to which future     correspondence should be addressed:   | Submit Certificate of<br>Assumed Business<br>Name and \$25.00 fee to:<br>Secretary of State<br>700 West Jefferson<br>Basement West<br>PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301 |
| 5. Name and address for this acknowledgment Phone number (optional):<br>copy is (if other than # 4 above):  |   |
|   | Secretary of State use only   |
| Signature:<br>(signature:<br>(signature required)<br>Printed Name:<br>Temp.<br>M. Char.<br>Karenhurg<br>(signature required)<br>Printed Name:<br>Temp.<br>M. Char.<br>Karenhurg<br>(signature required)<br>Printed Name:<br>Temp.<br>(signature required)<br>(signature required) |   |
| Capacity/Title:<br>(see instruction # 8 on back of form)  | D 77679   |