

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

10 FEB 25 AH 9: 45

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: Dia nified Designs 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name 15064 VISTA HITE'S DRIVING SCHOOL (W65644 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities X Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Assumed Business Manufacturing Mining Name and **\$25.00** fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Idaho Secretary of State 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 15064 VISTA (208) 334-2301 73607 5. Name and address for this acknowledgment CODY IS (If other than #4 above). Secretary of State use only Signature: Aussi

D 137228

AMES L HIT Printed Name:

Capacity/Title: OWNER - INSTRUCTOR

(see instruction # 8 on back of form)