



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.

07 AUG 27 AM 8:37
SECRETARY OF STATE
STATE OF IDAHO

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

Cliff's Auto Service

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

Name

Complete Address

Clifford R. Barrett

11265 Emerald Rd

Nampa ID 83686

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Clifford R. Barrett
11265 Emerald Rd
Nampa ID 83686

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

Signature: Cliff Barrett

(signature required)

Printed Name: Cliff Barrett

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
08/27/2007 05:00
CK: 15948 CT: 158010 BH: 1072538
1 @ 25.00 = 25.00 ASSUM NAME # 2

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