



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2015 SEP -8 AM 11:02
SECRETARY OF STATE
STATE OF IDAHO

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

Impact Auto Body

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Croner's Classics, LLC PO Box 102 Fairfield, Idaho 83327

(Name) (Withheld)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Croner's Classics, LLC

(Name)

PO Box 102

(Address)

Fairfield, Idaho 83327

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Matthew R Croner

Signature: Matthew R Croner

Printed Name: Janet M Croner

Signature: Janet M Croner

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

09/08/2015 05:00

CK:1373 CT:305469 BH:1491385
1@ 25.00 = 25.00 ASSUM NAME #2

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