



# 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.

10 APR -5 AM 8:41

SECRETARY OF STATE  
STATE OF IDAHO

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

ISAIAS Auto Repair

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

Name  
ISAIAS Hernandez

Complete Address  
87 INDIAN SUNSET DRIVE DRIGGS ID 83422  
PO BOX 186 DRIGGS ID 83422

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

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

ISAIAS HERNANDEZ  
PO BOX 186  
DRIGGS, ID 83422

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

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: Isaias \_\_\_\_\_

(signature required)

Printed Name: ISAIAS HERNANDEZ

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

IDaho SECRETARY OF STATE  
04/05/2010 05:00  
CK: 1762 CT: 200627 BH: 1216158  
1 # 25.00 = 25.00 ASSUM NAME # 2

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