

## CERTIFICATE OF ASSUMED BUSINESS NAME

7	FUE	
CERTIFICATE OF	FILED EFF	ECTIVE
ASSUMED BUSINESS I	NAME undersigned siness Name.	
Pursuant to Section 53-504, Idaho Code, the	undersigned	
submits for filing a certificate of Assumed Busi	siness Name.	?>
Please type or print legibly.  NOTE: See instructions on reverse before		
<ol> <li>The assumed business name which the under</li> </ol>	ersigned use(s) in the transaction of	F
business is:		
CAMPBELL AUTO BODY		
2. The true name(s) and <u>business</u> address(es) of	of the entity or individual(s) doing	
business under the assumed business name:		
Name (	Complete Address	
PATSY A. OLLER	CALDWELL, ID. 83605	
	CALDWELL, ID. 8360S	
3. The general type of business transacted und	der the assumed business name is:	
	and Public Utilities	
Z Neigh House	and I done of mines	
<ul><li>☐ Wholesale Trade</li><li>☐ Construction</li><li>☐ Agriculture</li></ul>	Submit Certificate of	7
☐ Manufacturing ☐ Mining	Assumed Business	
Finance, Insurance, and Real Estate	Name and \$20.00 fee to:	
4. The name and address to which future	Secretary of State	
correspondence should be addressed:	700 West Jefferson  Basement West	
PATSY OLIER	PO Box 83720	
617 SETHUR ST.	Boise ID 83720-0080 208 334-2301	
CALOWELL, ID. 83605		
5. Name and address for this acknowledgmen	nt Phone number (optional):	
copy is (if other than # 4 above);	208-459-1261	
SAME AS 4		
Jime 1/3	Secretary of State use or	ly .
	968	
Dt a non	T T T T T T T T T T T T T T T T T T T	
Signature: Latay Q. Olle (signature required)	IDAHO SECRETARY  27 26/2002  CK: 153338 CT: 1106	
Printed Name: <u>PATSY A. OLLER</u>		2 <b>05 = 00</b> 33 BH: 479343 ASSUM NAME # 2
Capacity/Title: <u>DWN</u> ER		MODUS INNE N C
(see Instruction # 8 on back of form)	D 54799	1