

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/FFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

02 MAY -6 AM 10: 16

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersignation business is: I smet Autobody Hysic mer A	gned use(s) in the transaction of
	Complete Address 19 Cleveland by Caldwell ALDWELL (1) 83605
3. The general type of business transacted under Retail Trade ☐ Transportation and Wholesale Trade ☐ Construction Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 353 5- Meridian road #101 HER IDIAN (D 83642	L
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208 76142/3 Secretary of State use only IDAHO SECRETARY OF STATE 05/07/2002 95:00 CK: CASH CT: 158010 BH: 464851 1 9 20.90 = 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	1)541046