CERTIFICATE OF ASSUMED BUSINESS NAME

2010 JAN 11 PM 4: 00

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

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before	ore filing.	
The assumed business name which the und business is: K's Auto Repair	- -	,
2. The true name(s) and business address(es business under the assumed business name Name Kendell Mose	c) of the entity or individual(s) doing ne: Complete Address 242 F. 7rt N. Suite* Rexional FD 83440	
3. The general type of business transacted un	nder the assumed business name is:	*
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: K's Auto Cepair 242 E. The N. Suite # I Lexbory, FD 83440	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	
 Name and address for this acknowledgme copy is (if other than #4 above). 	ent Phone number (optional): (208) 206-7021	,
Kendell Moser 520 w. 745. #211 Lexburg 50 83440	Secretary of State use only	· · ·
gnature: (signature required) rinted Name: (see instruction # 8 on back of form)	IDAHO SECRETARY OF ST ## ## ## ## ## ## ## ## ## ## ## ## ##	5 : 00