



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.

07 MAR -2 PM 2:27

SECRETARY OF STATE
STATE OF IDAHO

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

CHOP SHOP

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

Name	Complete Address
<u>RYAN D. ELLIS</u>	<u>2428 OVERLAND BOISE, ID 83705</u>
<u>LOGAN CAMERON</u>	<u>"</u>
<u>TRINITY DAVIS</u>	<u>"</u>

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

- | | |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

SAME

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

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

Phone number (optional):

(208) 713-3678

Signature: *Ryan D. Ellis*
(signature required)

Printed Name: RYAN ELLIS

Capacity/Title: _____

(see instruction # 8 on back of form)

Secretary of State use only

0108828

g:\corp\m\is\ain\form\assum p05
Revised 1/4/2003

IDAHO SECRETARY OF STATE
03/02/2007 05:00
CK: CASH CT: 158010 BH: 1036922
1 @ 25.00 = 25.00 ASSUM NAME # 2