

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

08 OCT -3 PM 3: 03

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

SECRETARY OF STATE

Cracker Jac	Driving Ac	cademy
The true name(s) and business address(e business under the assumed business na Name     Brian Eichler	me:	entity or individual(s) doing  Complete Address  Elgin Rd., New Plymouth, Idaho 83655
3. The general type of business transacted u	nder the	assumed husiness name in
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:  Brian Eichler  4545 Elgin Rd. New Plymouth, Idaho 83655  5. Name and address for this acknowledgm copy is (if other than #4 above):	•	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
		Secretary of State use only
rinted Name:  Capacity/Title:  (see instruction # 8 on back of form)	g:/corpitoms/ation forme/adon.p65 Revised 04/2003	IDAHO SECRETARY OF STATE 10/03/2008 05: CK: 89 CT: 158010 84: 1380

25.08 ASSUM NAME # 2