

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2004 NOV 15 82 8: 44

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

 The assumed business name which the un business is: 	dersigned use(s) in the transaction of
Capital Credit Re	pair
The true name(s) and <u>business</u> address(es business under the assumed business name	
<u>Name</u>	Complete Address
Gladys Jackie Servis	54526 Hwy 200
	P.O. Box 551
	Charkfork Idano 83811
3. The general type of business transacted under 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: Capital Credit Repair Po. Box 551 Clarkfork Idaho 8381	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional):
Capital Credit Repair 54526 Hwy 200 CLArkfork Fd 83811	Secretary of State use only
Signature: La Rie Serrice	IDAHO SECRETARY OF STATE
Printed Name: <u>Jackie Servis</u>	11/15/2004 05:00 CK: 2606 CT: 158010 BH: 776469
Capacity/Title: Owner	1 @ 25.00 = 25.00 ASSUM NAME # 2