



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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SECRETARY OF STATE
STATE OF IDAHO

FILED

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

Custom AutoRepair

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

<u>Judy Leigh</u>	<u>Complete Address</u>
	2959 Garrett Way
	<u>Pocatello Id 83201</u>
	<u>2959 Garrett Way</u>
	<u>Poc. Id 83204</u>

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

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

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

2959 Garrett Way
Pocatello Id
83201

Phone number (optional): 208-3478-1375

Submit Certificate of Assumed Business Name and \$20.00 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):

Signature: Judy Leigh

Printed Name: Judy Leigh

Capacity: _____

(see instruction # 8 on back of form)

Revision 1/98 g:\loop\form\labn.pds

Secretary of State use only
IDAHO SECRETARY OF STATE

09/09/1998 09:00
CX: NO CX # CT: 103743 BH: 143594

1 @ 20.00 = 20.00 ASSUM NAME

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