

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.

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

New → ABC Auto Clinic (old name-ABC Auto)

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

ABC Auto Clinic 2831 Poratello Ave American
208-226-2042 8320
Troy Brazelton

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

☒ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate
☐ Services ☐ Construction ☐ Mining

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

Phone number (optional): 226 2042

ABC Auto Clinic
P.O. Box 138
American Falls, ID 83211

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

Signature: Troy BrazeltonPrinted Name: Troy BrazeltonCapacity: Sole Proprietor

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

11/16/1998 09:00
 CK: 915 CT: 106814 BH: 161825

1 @ 20.00 = 20.00 ASSUM NAME # 2

D19986