

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2013 DEC -4 AM 8: 39

FILED EFFECTIVE

## SECRETARIE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

The true name(s) and <u>business</u> address business under the assumed busines	ess(es) of the entity or individual(s) doing
<u>Name</u>	ss name: <u>Complete Address</u>
Mandzic Dzevad	232 Heyburn Ave West, Twin Falls, ID 83301
3. The general type of business transact  Retail Trade Transpor  Wholesale Trade Construct	ted under the assumed business name is: rtation and Public Utilities
Services Agricultude Manufacturing Mining Finance, Insurance, and Real Es  4. The name and address to which future	Submit Certificate of Assumed Business Name and \$25.00 fee to:
correspondence should be addressed:  A & E Auto Sales	Secretary of State 450 North 4th Street PO Box 83720
564 Main Ave S Twin Falls, ID 83301	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment
gnature: <u>Dzevad Mondzic</u>	Secretary of State use only
nted Name: Mandzic Dzevad	
pacity/Title: Owner	
nature:	TRAUG PEOPETARY OF THE
nted Name:	
pacity/Title:	1 8 25.00 = 25.00 ASSIM MANE

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