



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED**

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.

89 JUL 15 AM 8:55

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

ASAP Mobile Repair

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

Name Aaron R. Higgins

### Complete Address

Complete Address  
623 W Doris Ave Paul ID 83347

Alice S. Higgins

623 W Doris Ave Paul TX 83347

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): (208) 438-2205

Aaron R. Higgins

1023 W Doris Ave.

Paul ID 83347

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

**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

07/15/1999 09:00  
 CX: 1011 CT: 110028 BH: 233905

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 27601

Signature:

*Alexa Higgins*

Printed Name:

Aaron R. Higgins

Capacity:

Owner

(see instruction # 8 on back of form)

Revision 1/98

CompVormsLab065