



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 OCT 23 AM 8:58

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

CAREY AUTOMOTIVE REPAIR & TOWING

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

Name

ANDREAS ENTERPRISES, LLC

W119405

Complete Address

PO BOX 329, CAREY, ID 83320

3. The general type of business transacted under the assumed business name is:

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

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

ANDREAS ENTERPRISES, LLC

PO BOX 329

CAREY, IDAHO 83320

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
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: L. Andreas

Printed Name: LEE ANDREAS

Capacity/Title: OWNER

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDaho SECRETARY OF STATE
10/23/2014 05:00
CK:329 CT:302456 BH:1446380
1@ 25.00 = 25.00 ASSUM NAME #2

D174488