FILED

227

CERTIFICATE OF ASSUMED BUSINESS NAME

04 APR 16 AM 11:39

SECRETARY OF STATE
STATE OF IDAHO

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

   Silver Auto Collision Repair

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

Name	Complete Address
Bret Allen	P.O. BOX 824 / 211 N. 3rd Osburn ID 83849

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

- [ ] Retail Trade
- [ ] Wholesale Trade
- [x] Services
- [ ] Manufacturing
- [ ] Finance, Insurance, and Real Estate
- [ ] Transportation and Public Utilities
- [ ] Construction
- [ ] Agriculture
- [ ] Mining

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

   Silver Auto Collision Repair
   PO BOX 824 / 211 N. 3rd Osburn ID 83849

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

Phone number (optional):

208-753-1951

Signature: (signature required)

Printed Name: Bret Allen

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

D75442

IDAHO SECRETARY OF STATE
04/16/2004 05:00
CK: 416114285319KAH CT: 172099 BH: 739740
1 @ 25.00 = 25.00 ASSUM NAME # 2