

Capacity: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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 business is: AJ'S Auto 6185 + Winds	runi.
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: Name Albert T Ramps 1017	
3. The general type of business transacted under the a Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: A Ramus 1017 W 1005 Black took Tahu 8333 5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
Signature: Printed Name: Albert J Rames Page 1000010 page 10000010 page 1000010 pag	IAMO CEOPETADA OF AVA

IDAHO SECRETARY OF STATE 62/25/2002 05:00 CK: 1016 CT: 157837 BH: 448386 1 0 20.00 = 20.00 ASSUM MANE # 2

D9428