



# 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 use(s) in the transaction of business is:

J-P TRANSPORT- ~~RE~~ AUTOWRECKING

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
<u>JEFFERY P SOBASZCZ</u>	<u>① 700 52 POKEY CREEK ROAD SANIA</u>
<u>RE</u>	<u>ID 8381</u>
<u>RE</u>	<u>8381</u>

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

AUTO WRECKING

<input 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:

PO BOX 191  
SANIAKIES ID  
83861

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

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

Phone number (optional):

208-245-1841

Signature: Jeffrey Sobaszcz  
(signature required)

Printed Name: JEFF SOBASZCZ

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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