いるう CERTIFICATE OF ASSUMED BUSINESS NAME • • • APR 14 9 22 AN 197 To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives ISTINE OF STATE of IDAHO adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Siebert's Mobile lipe Tress & 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: Address 1008E 1705 Sighert Siebert (same Dandra I. 3. The general type of business transacted under the assumed business name is: inigation service categories on the reve 4. The name and address to which correspondence should be addressed: Rick or Sandra Siebert Signed By Capacity Submit Certificate of Assumed Customer # Business Name and \$20.00 fee to: Secretary of State use only Secretary of State **LINAHO SECRETARY OF STATE** 700 West Jefferson Revision DATE 04/14/1997 0900 82478 PO Box 83720 -CK #: 1075 Boise ID 83720-0080 CUETS ASSUM NONE 20307 20.00 **b**m6 Ð