

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.

2006 AUG 28 AM 10: 29

SECRETARY OF STATE STATE OF IDAHO

	Mobile	Auto Works	s	
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 Adrian A Palomino 2582 Carriage Way, Twin Falls, ID 83301			
3.	The general type of business transacted under the Retail Trade Transportation	•	•	
	 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4.	The name and address to which future correspondence should be addressed: 2582 Cariage Way Twin Falls, ID 83301		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080	
	Name and address for this acknowledgme	ent	208 334-2301 Phone number (optional):	
5.			208-316-7212	
5.	copy is (if other than # 4 above): SAME		200-310-7212	
5.	COPY is (if other than # 4 above):	S 88	Secretary of State use only	****
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