

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
09 APR 21 PM I2: 37

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the under business in:	ersigned use(s) in the transaction of
business is:	LAWAU CARE
OVER THE TOP	CHEC
The true name(s) and business address(es) business under the assumed business name	
Name /	Complete Address
CARLOS A. VILLATUERTE	705 S. BONNEVILLEDR
	NAMPA, ID. 83686
3. The general type of business transacted und	ler the assumed business name is:
Retail Trade Transportation	and Public Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: ALA =	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
_ AMC	
	(208) 334-2301
Name and address for this acknowledgment	1
COpy is (if other than #4 above):	••
• •	
	Secretary of State use only
	No.
A. Wallet	or not
ignature: (glasture required)	IDAHO SECRETARY OF STATE 4/21/2009 65 a 60 CX: 227282 CT: 172099 Mit 116690
rinted Name ARLOS A. VILLATUELTE	IDANO SECRETARY OF STATE
apacity/Title:	04/21/2009 65100 CX: 227282 CT: 17299 No. 11440
(see instruction # 8 on back of form)	1 9 25.98 = 25.90 ASSIM NAME #