

CERTIFICATE OF ASSUMED BUSINESS NAME

NOT 1. The ass	ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu Please type or print legibly. E: See instructions on reverse before sumed business name which the under the content of the sum of the	e undersigned siness Name.
busines	S IS: L & C AG	REPAIR
2. The true busines	e name(s) and business address(es) ss under the assumed business name Name LARAMIE ECKMAN	of the entity or individual(s) doing e: Complete Address PO BOX 96
·.	EU/Marin Politica II.	TETON, ID 83451
U S S S S S S S S S S S S S S S S S S S	Vholesale Trade Gonstruction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate me and address to which future bondence should be addressed: MIE ECKMAN	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
PO BO	DX 96 N, ID 83451	(200) 534-2301
5. Name copy i	e and address for this acknowledgments (if other than # 4 above):	
	OX 126	Secretary of State use only
Signature: X Printed Name Capacity/Title		IDAHO SECRETARY OF STATE 95/15/2008 05 = 00 CK: 37858 CT: 226814 BH: 1115273 1 2 25.88 = 25.88 ASSUM MARE 1 2