

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

09 DEC 17 AM 8:40

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the under business is:  AirStyles Custom Pain		use(s) in the transaction of	
2. The true name(s) and business address(es) of business under the assumed business name:  Name  Barry K. W. Cray  Heather M. M. Cray		tity or individual(s) doing  Complete Address  S. 1000 W. Burky IO  15. 1000 W #   Burky I	9122 Q 3348
The general type of business transacted under      Retail Trade		·	
5. Name and address for this acknowledgment copy is (if other than # 4 above):		Secretary of State use only	
Signature: Bury K. iw(Cray  Capacity/Title: Aurer  (see instruction # 8 on back of form)	g-kooptomstabn Tormstabn.p65 Revised 04/2003	IDAHO SECRETARY 12/17/2009 CK: 2017/536964 <u>CT: 1</u> 58	OF STATE 255 = 282 010 BNs 1199544 ASSUM NAME # 2

D135629