

Signature:\_\_\_

Printed Name:

Capacity/Title: CUNCR

(see instruction #8 on back of form)

## 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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2004 OCT 12 AH 9: 33

STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: KUND AUTO MARK 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name Dauglas GRIGG 1583 W. PARK AUA ETHAL GRIGG KUNA, IN F3634 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of **Assumed Business** Mining Manufacturing Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 KUNA AUTO MART Boise ID 83720-0080 P.C. BCX 403 208 334-2301 KUNA, FO. 83630 Phone number (optional): 5. Name and address for this acknowledgment CODV IS (if other than #4 above). 209 477.4472 Secretary of State use only

> corpylormsvaon formsvao Revised 04/2003

IDANO SECRETARY OF STATE

10/12/2004 05:00

CK: 5022 CT: 150010 BH: 770474

10 25:00 = 25:00 ASSUM NAME # 2

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