

Printed Name: Francisco

Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 NOV -1 AM 8: 59

STATE OF IBAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.	
 The assumed business name which the undersigned business is: SHF Auto Wholesale The true name(s) and business address(es) of the 	
business under the assumed business name: Name Francisco Artuvye 1835 (Complete Address Frown Pointe Ave. Nampa ID. 83 N. Glamergan Meridian ID 830 W Gillette Meridian ID 830
Retail Trade Retail Trade Wholesale Trade Services Manufacturing Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Www.sco Agurre Nampa, TD 83651	
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (aptional)* (208) 880 - 5823 Cell.
Signature: francisco (lequire	Secretary of State use only

IDAHO SECRETARY OF STATE
11/01/2004 05:00
CK: 1950 CT: 158010 BH: 774070
1 0 25.00 = 25.00 ASSUM NAME # 2

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