CERTIFICATE OF ASSUMED   (Please type or print legibly. See instruction of the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Congives notice of adoption of an Assuma	uctions on reverse.)
1. The assumed business name which the undersigned use(s) in the transaction of business is:  LARRY CHRIS AUTOBODY  LARRY CHRIS AUTOBODY	
The true name(s) and business address(     business under the assumed business n     Name	(es) of the entity or individual(s) doing ame is/are: <u>Complete Address</u>
Kendell K. Karlson CINDY L. Karlson	66E. 300S. BURLEY, ID
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:  66 E. 3005-	Phone number (optional):208-678 002-3  Submit Certificate of '
BURLEY, ID 83318	Assumed Business . Name and \$28.00 fee to: Secretary of State
5. Name and address for this acknowledge copy is (remortion # 4 above):  ZIAKS BANK	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 - 208 334-2301
102 West Main	Secretary of State use early
bulley 12 83318 ionature: Gendell Karlson	
rinted Name: Kendell K. Karlson	THE INGINO SECRETARY OF STATE
(see instruction # 8 on back of form)	- 09/11/1998 09:00 CX: 1264 CT: 103847 DH: 144368 1 8 28.00 = 28.00 ASSUM HAVE

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