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.

112 MOV 21 PM 3: 13

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF IDAHO

1. The assumed business name which the undersigned i	use(s) in the transaction of
1. The assumed business name which the undersigned to business is:	- - - -
Auto lech	
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name:	
Name Name	Complete Address
LARRY SVEISON 115 Mt.	Home ID, 83640
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Public Retail Trade Construction	lic Utilities
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
1150 American Algion	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
copy is (if other than # 4 above):	
P.O. BOX 1137 Mt. HOME ID 83647	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE
Signature: (signature required) Printed Name: Lary ever sov	11/22/2002 05:00 CK: CASH CT: 158018 BH: 647431
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(see instruction # 8 on back of form)	ν 601 4-0