



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

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RECEIVED  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

- The assumed business name which the undersigned use(s) in the transaction of business is:

ACE HANSEN TRUCK SALES

- The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

ACE HANSEN CHEVROLET, INC.

C 42989

Complete Address

1564 BLUE LAKES BLVD. N TWIN FALLS  
ID 83301  
P.O. BOX 5179 TWIN FALLS, ID 83303

- The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

- The name and address to which future correspondence should be addressed:

ACE HANSEN TRUCK SALES

1653 ELM ST. N

TWIN FALLS, ID 83301

Submit Certificate of  
Assumed Business  
Name and **\$20.00** fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

- Name and address for this acknowledgment copy is (if other than # 4 above):

P.O. BOX 5179

TWIN FALLS, ID 83303

Phone number (optional):

208-733-3033

Secretary of State use only

Signature: ACE V. HANSEN

Printed Name: ACE V. HANSEN

Capacity: OWNER/PRESIDENT

(see instruction # 8 on back of form)