Signature:

Printed Name: Dustra

(see instruction #8 on back of form)

Capacity: <u>Owner</u>

CERTIFICATE OF ASSUMED BUSINESS NAME FECTOR (Please type or print legibly. See instructions on reverse.)	
Pursuant to Section 53-504, Idaho Code, the undersigned TATE OF STATE gives notice of adoption of an Assumed Business Name.	
 The assumed business name which the undersign business is: 13みの Autowocks 	ied use(s) in the transaction of
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Oustin Mechany Pocatalis , ID 83304	
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade	
Correspondence should be addressed: Dish Meching 1740 Arington Dr. Pocatello, ID 83204 5. Name and address for this acknowledgment copy is (if other than #4 above):	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
1607	Secretary of State use only

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IDAHO SECRETARY OF STATE

04/10/2002 05:00

CK: 107093 CT: 3663 BH: 458179

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