ent By: IDAHO SECRETARY OF STATE

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.  NOTE: See instructions on reverse before file	
The assumed business name which the unders business is:  Lake Fork Auto Body	igned use(s) in the transaction of
The true name(s) and <u>business</u> address(es) of t business under the assumed business name:  Name	14d . : i
The general type of business transacted under to the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining  Finance, Insurance, and Real Estate	
The name and address to which future correspondence should be addressed:  Allen 1 Susan Congleton PO Box 593 MCCall, Id 83/38	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):	Phone number (optional): (208)(234 - 1807)
	Secretary of State use only
Jusan Congleton	TRAIN SECRETARY OF STATE

Printed Name: Susan Congleton

Capacity/Title: Soc / Trus.:

(300 Instruction # 8 on back of form)

IDANO SECRETARY OF STATE

97/19/2004 05:00

CK: 716102946497CLH CT: 172099 BH: 756197
1 2 25.00 = 25.00 ASSUM NAME # 2