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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Please type or print legibly.

BEDALIGARY OF STATE STATE OF IDAHO NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: C & L Mobile Auto Repair 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Christopher P. Albright 6660 North 3rd East Mountain Hom 83647 Lori G. Albright 666 North 3 rd east Mountain Home, Idah 83647 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade XXX Services Agriculture Submit Certificate of Manufacturing Assumed Business Name and \$25.00 fee to: Finance, insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Christopher P Albright Boise ID 83720-0080 660 North 3rd East 208 334-2301 Mountain Home Idaho 83647 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above): (208)580-0831 ----Secretary of State use only Signature: // 172561 Printed Name: Christopher P. Albright Capacity/Titleowner IDAHO SECRETARY OF STATE 01/28/2004 05:00 CK: 533 CT: 158010 BH: 724259 1 0 25:00 = 25:00 ASSUM NAME # 2 (see instruction # 8 on back of form)