



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.

08 NOV 22 PM 3:49

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO
RECEIVED
STATE OF IDAHO

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

European Mobil Auto Service

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

Name

Momcilo Nikolic

Complete Address

4975 Albion St. Apt. 202
Boise, ID 83705

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

<input 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		

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

European Mobil Auto Service
4975 Albion St. Apt 202
Boise, ID 83705

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

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

Phone number (optional):

Secretary of State use only

Signature: Momcilo Nikolic
(signature required)

Printed Name: MOMCILo NIKOLIC

Capacity/Title: _____

(see instruction # 8 on back of form)

corpforms@dn.idaho.gov
Revised 07/2002

11/22/2002 05:00
CK: CASH CT: 158810 BH: 647667
1 @ 20.00 = 20.00 ASSUM NAME # 2

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