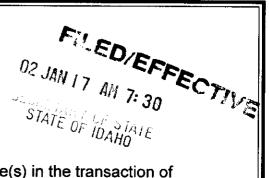


CERTIFICATE OF ASSUMED BUSINESS NAME

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 filing.



1. The assumed husiness name which the un	doroiano	od upo(a) in the transaction of
 The assumed business name which the un business is: 	uersigne	ed use(s) in the transaction of
I DAHO WINDOW TINTIN	6	
The true name(s) and <u>business</u> address(es business under the assumed business name) of the e	ntity or individual(s) doing
<u>Name</u>		Complete Address
DARRAN CRAGER	3112 S. MONTEGO WY	
	NAM	PA, ID 836860
3. The general type of business transacted ur	nder the a	assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	า and Pul	blic Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: ### TOAHO WINDOW TINTING 2422 12 ** AVE. RD ** 3666 **NAMPA FO 83686		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-23/11
 Name and address for this acknowledgme copy is (if other than # 4 above). 	ent	Phone number (optional):
SAME AS ABOVE		
		Secretary of State use only
Signature: Day	g 'corp/torms'abn forms'abn.p65 Revised 01/2001	
Printed Name: <u>DARRAN CRAGER</u>	vormslabn forms Revised 01/2001	IDAHO SECRETARY OF STATE は1/17/2002 は5:00 CK: 4819 CT: 155915 BH: 440807
Capacity: OWNER OPENATOR	corptor	1 8 20.00 = 20.00 ASSUM MAME # ;
(see instruction #8 on back of form)	Ö	
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