



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

01 JUN -7 AM 9:22

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

CAPT'N HOOK AUTO N GLASS

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

Name

Complete Address

SAMUEL JC GUEVARA

302 W. 4TH AVE. #16 POST FALLS

ID 83854-6910

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

- | | |
|--|--|
| <input checked="" 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:

① CAPT'N HOOK AUTO N GLASS

302 W. 4TH AVE #16

POST FALLS, ID 83854-6910

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):

SAME AS ABOVE

Phone number (optional):

208 457 9341

Signature: Samuel J. Guevara

Printed Name: SAMUEL JC GUEVARA

Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

06/07/2001 09:00
CK: 228 CT: 147323 BH: 401504

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revised 01/2001

ID 45932