

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

2006 DEC 18 PM 1:58

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

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:

ECKMAN AUTOMOTIVE MACHINE

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

Name

ECKMAN ALLIANCE, LLC

Complete Address

350 EAST 3000 NORTH, REXBURG, ID 83440

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 checked="" 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:

ECKMAN AUTOMOTIVE MACHINE

350 EAST 3000 NORTH

REXBURG, ID 83440

Submit Certificate of  
Assumed Business  
Name and \$25.00 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):

ALLIED FINANCIAL SERVICES, PLLC

P.O. BOX 674

REXBURG, ID 83440

Signature: Brian Eckman

(signature required)

Printed Name: BRIAN ECKMAN

Capacity/Title: MEMBER

(see instruction # 8 on back of form)

Secretary of State use only

5  
Information Form 5  
Rev 10/10/2003

IDAHO SECRETARY OF STATE  
12/19/2006 05:00  
CK: 4327 CT: 07111 BH: 1020522  
1 0 25.00 = 25.00 ASSUM NAME # 6

D106475