



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

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

2004 APR -2 PM 4:08

Please type or print legibly.

DEPARTMENT OF STATE
STATE OF IDAHO

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

Salvage Liquidators

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

Name
GoKart Fun Inc.
C149281

Complete Address
W. 3507 Se 1stci Way
Coeur d'Alene, ID 83814

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 | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

Joseph D. Kamps Jr.
3664 Highland Dr.
Coeur d'Alene, ID 83814

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

Phone number (optional):

208-704-2196

Signature: Joe Kamps Jr
(signature required)
Printed Name: Joe Kamps Jr
Capacity/Title: President

(see instructions # 8 on back of form)

Digitized by srujanika@gmail.com

IDAHO SECRETARY OF STATE
04/05/2004 05:00
CK: 48246450068LD CT: 172099 BH: 737200
1 @ 25.00 = 25.00 ASSUM NAME # 1

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