## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

	To the SECRETARY OF STATE, STA Pursuant to Section 53-504, Ide gives notice of adoption of an A	aho Code, the	undersigned 19 Am 9: 03
1.	The assumed business name which the u business is:	ndersigned us	se(s) in the transaction of
	MASTERS AUCTION SERVICE		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>	<u>Co</u>	mplete Address
	LYLE E. MASTERS	301 E MA	IN BUHL, IDAHO 83316
	GARY L. OSBORNE	1776 S 16	25 E GOODING, IDAHO 83330
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	Retail Trade Manufacturion Wholesale Trade Agriculture Services Construction	Fir	ansportation and Public Utilities <sup>†</sup> nance, Insurance, and Real Estate ning
4.	e name and address to which future Phone number (optional): 208-934-5350 respondence should be addressed:		
	GARY L. OSBORNE		Submit Certificate of
	1776 S 1625 E		Assumed Business
	GOODING, IDAHO 83330		Name and \$20.00 fee to:  Secretary of State
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Han L On borne	Revision 1/88	FIRST SECRETARY OF STATE AS A SCIN HAVE 4 2

Printed Name: Gary DSGORNE

Capacity:\_\_\_ PARTNER

(see instruction # 8 on back of form)

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