

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

Printed Name:

Signature:

Printed Name:

Signature:

FILED EFFECTIVE

2016 SEP 21 AM 8: 56

SECRETARY OF STATE

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

	itity names and business add name (do <u>not</u> include the name y	dress(es) of those doing business under ou listed in #1):
	OTA DEALERS ADVERTIS	ING ASSOCIATION, INC.
(Name) C 87535	(Address) 470 WEST KATHLEE	N AVE, COEUR D ALENE, ID 83814
(Name)	(Address)	NAVE, COLOR D'ALLINE, ID 03014
(Name)	(Address)	•
(Name)	(Address)	· · · · · · · · · · · · · · · · · · ·
The general type of bus	iness transacted under the a	ssumed business name is:
Retail Trade Wholesale Trade	Construction Agriculture	☐ Transportation and Public Utilities☐ Mining
X Services	Manufacturing	Finance, Insurance, and Real Estate
Mailing address for futu	re correspondence: 5	. Name and address for this acknowledgment copy is (if other than #4):
MICHAEL J. WHITE		GRANT W. RIVA
(Name) 470 WEST KATHLEEN AVENUE		(Name) 308 W 1ST AVE, SUITE 211
(Address) COEUR D ALENE, ID 83814		(Address) SPOKANE, WA 99201
COEUR D'ALENE, ID	(State) (Zipcode)	(City) (State) (Zipcode)

1DAHO SECRETARY OF STATE 09/21/2016 05:00

CK:2754 CT:321337 BH:1547292 16 25.00 = 25.00 ASSUM NAME #2

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