## **CERTIFICATE OF** ASSUMED BUSINESS NAME OF 19 PM 12: 15 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name (C. FACE OF ALL 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:  Toledo Auctions	
Totali iibdo	ler the assumed business name is:
<ul> <li>Wholesale Trade</li></ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  910 N (th EAst  # mountain home Id:  \$3647	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than #4 above);</li> </ol>	Phone number (optional):  208-587-8089  (all 208-440 - 6933
Signature: Muse State  Printed Name: Manual F- Toled of Capacity/Title: 04/108/2  (see instruction # 8 on back of form)	Secretary of State use only    Secretary of State use only