



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

JUL 21 1997

CLERK OF STATE
IDAHO

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

Full Throttle Auto Repair

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

Name

Complete Address

Mike Woosley

426 N. Bay Street Post Falls, ID 83854

Carol Goodman

426 N. Bay Street Post Falls, ID 83854

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:

Full Throttle Auto Repair

426 N. Bay Street

Post Falls, ID 83854

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):

Carol Goodman/Mike Woosley

710 S. Widgeon Street

Post Falls, ID 83854

Phone number (optional):

(208) 457-9749

Secretary of State use only

Signature: Carol Goodman / Mike Woosley

(signature required)

Printed Name: Carol A. Goodman

Capacity/Title: Partner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
07/26/2004 05:00
CK: 2668 CT: 158010 BH: 757451
1 @ 25.00 = 25.00 ASSUM NAME # 2

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