



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE
608-827-5300 ext. 269

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Repo Motorsports, LLC

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

North Idaho Motorsports, LLC

12140 Chicken Point Road, Hayden Lake,
Idaho 83835

(W19441)

3. The general type of business transacted under the assumed business name is:

- ☒ Retail Trade
☐ Wholesale Trade
☐ Services
☐ Manufacturing
☐ Finance, Insurance, and Real Estate

- ☐ Transportation and Public Utilities
☐ Construction
☐ Agriculture
☐ Mining

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

12140 Chicken Point Road, Hayden Lake,
Idaho 83835

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):

Business Filings Incorporated

8040 Excelsior Dr., Ste. 200

Madison, WI 53717

Phone number (optional):

608-827-5300 ext. 269

Signature: _____

(signature required)

Printed Name: Peter Rozin

Capacity/Title: Member

(see instruction # 8 on back of form)

Secretary of State use only

-- Don't forget to sign the form after you've printed it out!

for
releasin
w/used 04/200

IDAHO SECRETARY OF STATE
11/29/2007 05:00
CK: 115771 CT: 127351 BH: 1087434
-- such as: owner, president, partner, manager, etc.

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