

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2005 MAY 25 F. 9: 12

submits for filing a certificate of Assumed Business Name. Please type or print legibly. NOTE: See instructions on reverse before filing.

The assumed business name which business is: AUTO CREPUS	the unders	signed use(s) in the transaction o	of
AUTO CREDIT			2
2. The true name(s) and business addr business under the assumed busines Name CCC & TB, LLC W39898		the entity or individual(s) doing Complete Address W SELTICE WAY POST FAI	LS ID
3.0			3854
Services Agriculture Manufacturing Mining Mining Finance, Insurance, and Real Es 4. The name and address to which future correspondence should be addressed: AUTO CREDIT 1105 N LINCOLN SPOKANE WA 99201	tation and lection are tate	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	
 Name and address for this acknowledge copy is (if other than # 4 above): 	ment	Phone number (optional): 509-326-8484_xt_18	ł
		Secretary of State use only	
nted Name: WILLIAM J FUNK pacity/Title: MANAGER	2'corpitamisiaon formsiaon pes Revised 04/2003		

IDAHO SECRETARY OF STATE 06/08/2005 05:00 CX: 24228 CT: 189248 BH: 814961 1 @ 25.88 = 25.88 ASSUM NAME # 2