



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
2004 MAR -4 AM 8:53

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:

Bulldog Liquidators

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

Carlos Goulart

1518 E 3rd Post Falls ID 83854

Kevin Tyson

1053 Emma Ave #523 CDA ID 83804

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

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

Bulldog Liquidators
Attn: Kimberly Tyson
2745 W. Seltice Way Suite B
Post Falls ID 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208 704 5692

Signature: Kevin Tyson
(signature required)

Printed Name: Kevin Tyson

Capacity/Title: Co-owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
03/04/2004 05:00
CK: 500070020 CT: 150010 BH: 730004
1 @ 25.00 = 25.00 ASSUM NAME # 2
1 @ 1.00 = 1.00 CORP FORI # 3

g:\corp\forms\labn form\statlabn.p65
Revised 04/2003

D73778