CERTIFICATE OF FILED EFFECTIVE
ASSUMED BUSINESS NAME 1: 53

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

Please type or print legibly. STARE OF ID. 1.10 Instructions are included on back of application.	
1. The assumed business name which the undersigned use(s) in the transaction of business is:  Sact Idah Auto Auction	
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address  Blackfoot. To  (W102350)	
3. The general type of business transacted under Retail Trade Transportation are Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	er the assumed business name is:  nd Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  539 w. Hwy 7(2  Black foot, Td.	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	
Signature:  Printed Name: Doug Saxton  Capacity/Title: Partner	Secretary of State use only
Signature  Printed Name: Recommendation  Capacity/Title: Member	IDAHO SECRETARY OF STATE <b>94/28/2911 95:00</b> CK: 664254 CT: 172099 BH: 1271210 1 0 25.00 = 25.00 ASSUM MANE N 2

abr.pmd Rev. 07/2010

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