



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.

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

WACKERL AUTO CENTER

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

Name

B.A. WACKERL CO.
244074

Complete Address

P.O. Box 50857 Idaho Falls
Id. 83405

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" 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:

B.A. WACKERL CO. INC.
P.O. Box 50857
Idaho Falls ID 83405

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

Phone number (optional):

Secretary of State use only

Signature:

John L. KENNEDY
(signature required)

Printed Name: John L. KENNEDY

Capacity/Title: General Manager

(see instruction # 8 on back of form)

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