

## 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.

02 SEP -6 PM 3: 33

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

<ol> <li>The assumed business name which the under business is:</li> </ol>	
TNT INSUFED Towing ?	AUTO SAIVAGE
2. The true name(s) and business address(es) of business under the assumed business name:  Name  Tommy N Thompson	Complete Address  6379 W Gowen Rd  150152 ID \$3707
3. The general type of business transacted under	er the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):  362-4418
	Secretary of State use only
Signature: Signature: Signature: Signature: Signature: Signature required)  Printed Name: Tommy N Thompson  Capacity/Title: Owner (See instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 99/06/2002 05:20  CK: 37829 CT: 83298 BH: 486818 1 @ 20.60 = 20.60 ASSUM MANE # 2