



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED/EFFECTIVE

DEC -2 PM 2:53

STATE OF IDAHO

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

CCC TITLE LOANS

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

COMBS CAR CORRAL, INC. *CIDH*

536 CALDWELL BLVD NAMPA ID 83651

COMBS CAR CORRAL INC.

9640 FAIRVIEW AVE BOISE ID 83704

COMBS CAR CORRAL, INC.

1215 N. WHITLEY DR FRUITLAND ID 83619

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

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

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

COMBS CAR CORRAL, INC.

536 CALDWELL BLVD

NAMPA ID 83651

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

Phone number (optional):

208-465-0048

Secretary of State use only

Signature: *[Signature]*

Printed Name: *Dennis Combs*

Capacity/Title: *Owner / Pres*

(see instruction # 8 on back of form)

g:\corp\form\idn form\idn.p65
Revised 09/2002

IDAHO SECRETARY OF STATE

12/02/2002 05:00
CK: 25207 CT: 27780 SM: 648983

1 @ 20.00 = 20.00 ASSUM NAME # 2

D60391