227 CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Mandet 1. The assumed business name which the undersigned use(s) in the transaction of business is: Excelsior TRANSPORT 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: **Complete Address** POBOX16 Medimont The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining The name and address to which future Phone number (optional): ____ correspondence should be addressed: Seeger Abatachior Rangent Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 5. Name and address for this acknowledgment 700 West Jefferson Basement West COPY IS (if other than # 4 above). BANK OF AMERICA PO Box 83720 / 1/ APPLEWAY BRANCH #98503 Boise ID 83720-0080 ġ. W. 501 Appleway 208 334-2301 Coeur d'Alene, ID 83814 (208) 667-3537 Secretary of State use only Revision 2/97 IDAHO SECRETARY OF STATE Signature: 02/15/2000 09:00 CK: 2 CT: 126739 BH: 296333 Printed Name 1 @ 20.08 = 20.08 ASSUM MAME # 2 Capacity: pVformstabn 33140 (see instruction # 8 on back of form)