

FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

98 FEB -9 AM 10:38

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 Name.

SECRETARY OF STATE
STATE OF IDAHO

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

ADVANCE INSURANCE

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

Name
DENNIS T. EARL

Address
855 LINDEN PLACE IDAHO FALLS
ID 83401

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

8

See categories on the reverse

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

DENNIS T. EARL, ADVANCE INSURANCE, 2054 E. 17th ST.
IDAHO FALLS IDAHO 83404

Signed

[Signature]

By

DENNIS T. EARL

Capacity

OWNER / AGENT

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

ID 83401

02/09/1998 09:00
CK: MD CK #: CT: 93954 BH: 88459

1 @ 20.00 = 20.00 ASSUM NAME

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Revision 1000

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