



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

03/11/2003 05:00

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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

Inglis Vending

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

Whelan Sales Northwest, Inc. P.O. Box 303
()C122476 Eagle, ID 83616

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 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 type="checkbox"/> Finance, Insurance, and Real Estate	

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

Whelan Sales Northwest
P.O. Box 303
Eagle, ID 83616

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):

208 342-1847

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

Signature: David W. Whelan

(signature required)

Printed Name: David W. Whelan

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State use only

Form 504 (Rev. 09/2002)
g:\\corporate\\forms\\504.p65

IDaho SECRETARY OF STATE
03/11/2003 05:00
CK: CASH CT: 158810 BH: 667733
10 20.00 = 20.00 ASSUM NAME # 2

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