Signature:_

Capacity:

Printed Name: //

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINERED/EFFECTIVE (Please type or print legibly) 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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Auto Body Paint & Supply 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 Name PO Box 89, St. Anthony, ID 83445 D. & A. Inc. (C- 39529 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing ** Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Bank of Idaho Name and \$20.00 fee to: PO Box 126 Secretary of State -St. Anthony, ID 83445 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY iS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only

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