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 Name (18)	
1. The assumed business name which the undersigned use(s) in the transaction of Wallace Automotive	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Randall S. Welker 67 Misso	omplete Address ouri Mtn. Dr.
Cindy B. Welker Sagle II	
The general type of business transacted under the assumed business name is: (mark only those that apply)	
XX Services	ansportation and Public Utilities nance, Insurance, and Real Estate ning
The name and address to which future Phone number (optional): correspondence should be addressed: Randall S. Welker	
67 Missouri Mtn. Dr.	Submit Certificate of Assumed Business
Sagle ID 83860	Name and \$20.00 fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above). same	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IBANO SECRETARY OF STATE

U5/U2/2001 09:00 CK: 18788 CT: 79651 BH: 394788

1 # 20.00 = 20.00 ASSUM NAME # 2

18844

Signature: Randall 5 Welher Printed Name: Randall S. Welker

Capacity: Owner

(see instruction # 8 on back of form)