CERTIFICATE OF ASSUMED BUSINES AME (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 Nache, 1. The assumed business name which the undersigned use(s) in the transact business is: HILLSIDE AUTOMOTIVE 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 Complete Address MICHAEL D NYCE 1577 N. PLAZA RD, EMMETT, IO 83617 Complete Address 3. 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 4. The name and address to which future Phone number (optional): (408) 345-1073 correspondence should be addressed: Submit Certificate of Assumed Business Name and **\$20.00** fee to: EMMETT TO 83617 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE Signature: Mulas D. Juce 12/06/2000 09:00 CX: 1078 CT: 139299 BH: 364960

28.00 = 28.00 ASSUM NAME # 2

Printed Name: MICHAEL Capacity: SOLE PROPRIETOR (see instruction # 8 on back of form)