

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned **99 MAY 26 AN** gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE

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

IDAHO CLASSIC CAR CENTER

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

<u>Name</u>	<u>Complete Address</u>
<u>NICK CARLSON</u>	<u>8320 FairView Boise ID</u>
<u>Wayne Carlson</u>	<u>83704</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future Phone number (optional): _____
-----sed:

NICK CARLSON
8320 FAIRVIEW
BOISE ID 83704

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

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

Nick Carlson

5201 SADIE ST

Boise ID 83709

Secretary of State use only

Signature: Nick L. Carlson

IDAHO SECRETARY OF STATE
05/26/1999 09:00
CK: 448 CT: 116041 BH: 220161

Printed Name: Nick L Carlson

1 @ 20.00 = 20.00 ASSUM NAME # 2

Capacity: Partner

(see instruction # 8 on back of form)

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