

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED

99 FEB -2 AM 8:58
SECRETARY OF STATE
STATE OF IDAHO

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:

GARY'S WESTLAND MOTORS

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

Westland Motor Co., Inc.

**1427 Blue Lakes Blvd. North
Twin Falls, ID 83301**

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 checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future Phone number (optional): _____
correspondence should be addressed:

Gary's Westland Motor Co.
P.O. Box 6099
Twin Falls, ID 83303-6099

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

J. Walter Sinclair
Benoit, Alexander, Sinclair,
Harwood & High
P.O. Box 366
Twin Falls, ID 83303-0366

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
208 334-2000 SECRETARY OF STATE

02/02/1999 09:00
CK: 18000 CT: 2053 BN: 184189

1 @ 20.00 = 20.00 ASSUM NAME # 5

Signature: _____

Printed Name: Gary Storrer

Capacity: President

(see instruction #8 on back of form)

D 22745