

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on other page.)

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.

STATE OF IDAHO

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

Dave Adams Windshields

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

Dave Adams Windshield Doctor, Inc.

5006 Fairview Avenue

Boise ID 83706

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

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

Retail Trade
Wholesale Trade
Services

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Manufacturing
Agriculture
Construction

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Transportation and Public Utilities
Finance, Insurance, & Real Estate
Mining

4. The name and address to which future correspondence should be addressed:

Dave Adams Windshields
5006 Fairview Avenue
Boise ID 83706

Phone number (optional): _____

Submit Certificate of
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 acknowledgement copy is (if other than #4 above):
FIRST SECURITY BANK N.A.
COMMERCIAL LOAN DOCUMENTATION CENTER
PO BOX 8203
BOISE ID 83707

Signature:

Dave Adams

Printed Name: Dave Adams Windshield Doctor, Inc. By Dave Adams, President

Capacity:

Owner

Dave Adams
(see instruction #8 on other sheet)

IDAHO SECRETARY OF STATE

11/13/2000 09:00
CK: 4675 CT: 1519 DN: 360648

1 @ 20.00 = 20.00 ASSUM NAME # 2

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