Capacity: OWNER

(see instruction # 8 on back of form)

TFICATE OF ASSUMED BUSINESS INTO (Please type or print legibly. See instructions on reverse by Mar SECTION OF STATE, STATE OF IDAHO Code the undersigned And Secretary Of the Undersigned State of CERTIFICATE OF ASSUMED BUSINESS 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 transac business is: EZ RENT A CAR 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name F.LIZHBETH PALMER 143 VENUE WEST 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 Phone number (optional): 208 736-8811 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business HUENUE WEST Name and \$20.00 fee to: Secretary of State 700 West Jefferson 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 US/U4/2001 U9:00 Signature: Leli 24/54 28.00 = 28.00 ASSUM NAME # 2 Printed Name: EU

D 415083