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CERTIFICATE OF ASSUMED BUSINESS NAME

(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 Name.

97 MAY 15 AM 11
SECRETARY OF STATE
STATE OF IDAHO



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

CARLISLE SPRING BRAKE PRODUCTS

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>
MOTION CONTROL INDUSTRIES, INC.	1031 E. HILLSIDE DRIVE
	BLOOMINGTON, IN 47401

- 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 correspondence should be addressed: Phone number (optional): 208-466-3680

CARLISLE SPRING BRAKE PRODUCTS
400 3rd ROAD NORTH
NAMPA, IDAHO 83687

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

**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**

Secretary of State use only

Signature:

Wayne L. Kinsey

Printed Name: _____

WAYNE R. KINSEY

Capacity:

PRESIDENT

(see instruction # 8 on back of form)

The Journal of the American Medical Association

IDAHO SECRETARY OF STATE
 DATE 05/15/1997
 0900 93185 2
 CK #: 5976 CUST#: 62360
 ASSUM NAME 1@ 20.00= 20.00

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