

Capacity/Title:_

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing.

| Paid / 3554 Key Bank | |
|-------------------------|--|
| n the transaction of | |

| The assumed business name which the und business is: | dersigned use(s) in the transaction of |
|---|--|
| TOWN HALL'S AUT | D SALES |
| 2. The true name(s) and business address(es) business under the assumed business name Name TOWN HALL | of the entity or individual(s) doing e: Complete Address 1451 NARTHUR POCATELLO TO 93204 |
| 3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: TOWN HALLS AUTO SAL TOWN HALL OWNER 145 [N A R TH UR POCATELLO TO AHO 93 Name and address for this acknowledgment copy is (if other than #4 above): | _ |
| (in other trial) # 4 above). | 208-232-8522 Secretary of State use only |
| Signature: <u>AOWN</u> Hall (signature required) | Seed norms/aton person forms/aton person forms/a |
| Printed Name: TOWN HALL | sed Currons Sed Currons () |

IDAHO SECRETARY OF STATE
11/29/2004 05:00
CX: 3554 CT: 158810 BH: 778867
1 0 25.00 = 25.00 ASSUM NAME # 2