	CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions of perse.)		
# 6	To the SECRETARY OF STATE, ST Pursuant to Section 53-504, I gives notice of adoption of an	TATE OF IDAHO daho Code, the Assumed Busir	undersigned AH 8: 48
1.	The assumed business name which the undersigned use(s) in the transaction of the business is:		
	Westergard Transfer and Storage Com	ipany	·
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>	Complete Address	
	MacKay Corporation	805 Clay Avenue, Idaho Falls, ID 83402	
	C 132943		
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 Phone number (optional): correspondence should be addressed:		
	Westergard Transfer and Storage		Submit Certificate of
	805 Clay Avenue		Assumed Business Name and \$20.00 fee to:
	Idaho Falls, ID 83402		Secretary of State 700 West Jefferson
		4	

5. Name and address for this acknowledgment

CODY is (if other than # 4 above).

Basement West PO Box 83720 Boise ID 83720/0080 208 334-2301

Secretary of State use only

Signature: \(\lambda\)

Printed Name: Donald MacKay III

Capacity: President

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

03/30/2000 09:00 CK: 13253 CT: 123899 M: 384185

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