



CERTIFICATE OF ASSUMED BUSINESS NAME

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

02 FEB -7 AM 10:13
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Independent Tractor North

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Benjamin E. Drinkwine

2453 Hwy 95 Council, ID 83612

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Independent Tractor North

2453 Highway 95

Council, ID 83612

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 acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-253-4250

Signature: Benjamin E. Drinkwine

Printed Name: Benjamin E. Drinkwine

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Secretary of State use only

IDAHO SECRETARY OF STATE
02/07/2002 05:00
CK: 2621 CT: 156956 BH: 444045
1 @ 20.00 = 20.00 ASSUM NAME # 2

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