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 NameRY OF STATE 1. The assumed business name which the undersigned use(s) in the transactibo of business is: MASTALSKI'S SKID-STEER SERVICE 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 1070 CAMAS ST JOSEPH M. MASTALSKI 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) 376-7691 4. The name and address to which future correspondence should be addressed: JOSEPH MASTALSKI Submit Certificate of Assumed Business 11070 CAMAS ST Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above); PO Box 83720 / 7 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE

Signature:_

Printed Name: Joseph

Capacity: Own P

(see instruction # 8 on back of form)

82/89/20**00** 09:00 CK: 2396 CT: 126424 BH: 288528

1 # 20.90 = 20.88 ASSUM NAME # 2