

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.

APR 16 10 37



SECRETARY OF STATE
STATE OF IDAHO

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

M.G. Tractor 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:

| Name | Complete Address |
|--------------------------|--|
| <u>David A. Goodman</u> | <u>5875 SE 9th Av Caldwell ID 83605</u> |
| <u>Deborah L. Mackay</u> | <u>5875 SE 9th Av Caldwell ID 83605</u> |

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

| | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-455-3280

David Goodman or Deborah Mackay
5875 SE 9th Av
Caldwell, ID 83605

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):

Signature: [Signature]

Printed Name: Deborah L. Mackay

Capacity: General Partner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 04/16/1997
0900 83522 1
CK #: 3587 CUST# 79958
ASSUM NAME 1@ 20.00= 20.00

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