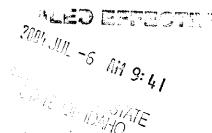
Capacity/Title: President

(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.



NORTHWEST Aut	o TRANSport
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name LoCo Inc (C-135336)	es) of the entity or individual(s) doing me: Complete Address 4722 W VABUERO Lane Mendian Tadako 830
3. The general type of business transacted u Retail Trade Wholesale Trade Construction	on and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
NORTHWEST Auto Transport 4722 W VAQUERO LANE WERIDIAN TOLAHO 83642	Boise ID 83720-0080 208 334-2301
4722 W VAQUERO LANE	208 334-2301

IDAHO SECRETARY OF STATE 67/06/2004 05:00 CK: 1426 CT: 188475 BH: 753975 1 8 25.80 = 25.80 ASSUM MANE # 2