



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.

FILED/EFFECTIVE
01 DEC 11 PM 2:15

SECRETARY OF STATE
STATE OF IDAHO

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

SHOWROOM CARS

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

Name

Philip E. Oliver

Complete Address

1109 ALBEN HWY 2 PRIEST RIVER
IDAHO 83856

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

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

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

SHOWROOM CARS
1109 ALBEN HWY 2
PRIEST RIVER ID 83856

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 to (if other than # 4 above):

Phone number (optional):

208 418 0447

RECEIVED

DEC 10 2001

STATE TAX COMMISSION
CLERK #18

Signature: Philip Oliver

Printed Name: Philip Oliver

Capacity: SOLE OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
12/12/2001 05:00
CK: 4380 CT: 154513 BH: 433993
1 @ 20.00 = 20.00 ASSUM NAME # 2

g:\corp\form\labn form\labn.p65
Revised 01/2001

D50415