CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned 2003 OCT 21 AM 8: 30 submits for filing a certificate of Assumed Business Name. Please type or print legibly. SC. LIARY OF STATE NOTE: See instructions on reverse before filing. STATE OF IDAHO The assumed business name which the undersigned use(s) in the transaction of business is: Calkins Automolive 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of **Manufacturing** Mining Assumed Business Finance, Insurance, and Real Estate Name and \$20.00 fee to: 4. The name and address to which future. Secretary of State correspondence should be addressed: 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional). CODY IS (if other than # 4 above).

Secretary of State use only

Signature: Printed Name: Capacity/Fitte: (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 10/27/2003 05:00 CK: 1011 CT: 158010 BH: 708547 1 0 25.00 =