

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED



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.

Nov 26 10 18 AM '99

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

Magic Valley Liquidators

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

Dennis D Freeman 1322 Washington St N. Twin Falls ID
A-1 83301

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

- | | | |
|--|--|--|
| <input checked="" 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 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): _____

453 Main Ave. E.
Twin Falls
Idaho 83301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Dennis Freeman
1322 Washington St. N. # A-1
Twin Falls, ID 83301

Signature: Dennis Freeman

Printed Name: Dennis D Freeman

Capacity: Owner

(see instruction # 8 on back of form)

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

Secretary of State use only
IDAHO SECRETARY OF STATE

11/26/1999 09:00
CX: 5332 CT: 123434 BH: 269188

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 31096

Revision 2/87

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