F. 62/61

SEP-12-2000 12:47

HOME FEDERAL

## FILED/EFFECTIVE

227

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See Instructions on reverse.)  STATE OF IDAHO  STATE OF IDAHO	
To the SECRETARY OF STATE, STATE  Pursuant to Section 53-504, Idah  gives notice of adoption of an As	o Code, the undersigned sumed Business Name.
1. The assumed business name which the und business is:  The Motor Wo	i i
2. The true name(s) and business address(es business under the assumed business name.  Name	of the entity or individual(s) doing ne is/are:  Complete Address
Lowell Smith	P.O.Box 381, Greenleaf, Idaho
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacturin  Wholesale Trade Agriculture  Services Construction	Finance, Insurance, and Real Estate
<ol> <li>The name and address to which future correspondence should be addressed:</li> </ol>	Phone number (optional):
Lowell Smith  dba The Motor Works  P.O. Box 381  Greenleaf, Idaho 8362	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme	1 100 11001
CODY IS (If other than # 4 above):	Boise ID 83720-0060 208 334-2301
	Secretary of State use only  IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE

08/28/2901 05:00

CK: 6320 CT: 158579 BH: 415896

1 8 28.88 = 28.88 ASSUM NAME # 2

D47927

Printed Name: Lowell Smith

Capacity: Owner

(see instruction # 8 on back of form)