## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 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. 1. The assumed business name which the undersigned use(s) in the transact business is: Dr. Flords Garage 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Addres Mark W. Flord 1440 Rush Rd. 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Mining Construction Services Phone number (optional): 459-4152 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business 30/1 Iowa Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE

Signature: That W. Floyd

Printed Name: Mark W. Floyd

Capacity: Owner

(see instruction # 8 on back of form)

07/22/1999 09:00 CK: CASH CT: 118293 BH: 235648

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