Capacity:

(see instruction # 8 on back of form)

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 transaction of business is: CUSTOM TOP AND COVER 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 Address Name 5286 CHOCTAW WAY ARRY A ELLIS POISE 3. The general type of business transacted under the assumed business name is: (mark only those that apply) | Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): 208-362-673/ correspondence should be addressed: Submit Certificate of Assumed Business 5286 CHOCTAN WAY Name and \$20,00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 ISANO SECRETARY OF STRIETLY 08/19/1999 09:00 CK: CASH CT: 119586 BH: 243376 Signature: 1 8 20.00 = 20.00 ASSUM NAME # 2 Printed Name: D28521