## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on revered. LED To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the wadersic

(see instruction #8 on back of form)

| gives notice of adoption of an                                                                                                                    |                                                                                                   |
|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|
| The assumed business name which the business is:                                                                                                  | undersigned use(s) hate transaction of                                                            |
| C's Quick                                                                                                                                         | stop                                                                                              |
| 2. The true name(s) and business address(business under the assumed business name  Name  Name  Name                                               |                                                                                                   |
| Mark Ehlers                                                                                                                                       | Same 03301                                                                                        |
| 3. The general type of business transacted (mark only those that apply)  Retail Trade Manufactur Wholesale Trade Agriculture Services Constructio | ring   Transportation and Public Utilities  Finance, Insurance, and Real Estate                   |
| 4. The name and address to which future correspondence should be addressed:                                                                       | Phone number (optional):                                                                          |
| Thin Falls Id 83301                                                                                                                               | Submit Certificate of Assumed Business Name and \$20.00 fee to:                                   |
| 5. Name and address for this acknowledgm copy is (if other than # 4 above):  809 Rim Vira Ln W.                                                   | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Thin Falls Id                                                                                                                                     | Secretary of State use only                                                                       |
| 8330/                                                                                                                                             | IBAHO SECRETARY OF STATE  99/02/1999 69:00 CK: 2356 CT: 120056 BH: 247063                         |
| gnature: Couthey Ehlers                                                                                                                           | CK: 2356 CT: 120056 DH: 247063                                                                    |
| inted Name: CAthy Ehlers                                                                                                                          |                                                                                                   |
| anacity: Only                                                                                                                                     | 1) 28898                                                                                          |