## CERTIFICATE OF ASSUMED BUSINESS NAM (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: BILL'S AUTOMOTIVE AND MUFFLER 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 Sil Price 402 Mari Du. S. Twin Laus 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 Phone number (optional) 200733-008/ 4. The name and address to which future correspondence should be addressed: BILLS AUTOMOTIVE & MUFFLER Submit Certificate of 402 MAIN AVE.S. TWIN FALLS, IDAHO 83301 Assumed Business 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:/ Printed Name: /

Capacity: Owner

(see instruction #8 on back of form)

02/01/1999 09:00 CK: 16998 CT: 110483 BH: 183889