

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2005 APR -7 AM 8: 54

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF ILAHO

The assumed business name which the under business is: TL Bar Auto Wol	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name William Jones	of the entity or individual(s) doing e: <u>Complete Address</u> 170 Anderson Creok Rd Garden Va 108
3. The general type of business transacted und Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: William Jones To Anderson CK Rd Conden Valley TD 83622 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: 1/1/1 /2	Secretary of State use only
Printed Name: William Jones Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE O4/07/2005 05:00 CK: 2905 CT: 158010 RH: 803323 1 8 25.00 = 25.00 ASSUM NAME # 2

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