ERTIFICATE 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 undersigged gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned users in th on of business is: enner Trans 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address INNE 3/00 Wome 10 8333 OME 63338 NOI 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 Aariculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): \_\_\_\_\_ correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: 'AABX 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 Secretary of State use only IDAHO SECRETARY OF STATE Signature: 09/13/1999 09:00 CK: 1722 CT: 128416 BH: 249249 Printed Name: 1 @ 28.86 = 28.08 ASSUN NAME # 2 Capacity: / )Unot (see instruction # 8 on back of form)