## 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. 7 1. The assumed business name which the undersigned use(s) in the transaction of business is: AMERICAN DISTRIBUTION 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 HALID HEZIREVIC 1630 ANNETT #2 Roise, 10 83705 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): \_ correspondence should be addressed: HALID NEZIREVIC Submit Certificate of Assumed Business 1630 HNHETT #2 Name and \$20.00 fee to: BOISE 10 83705 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

06/29/1998 09:00 CK: CASH CT: 100633 BH: 123767

1 @ 20.00 = 20.00 ASSUM NAME

D16273

Signature: Ad lid

Printed Name: HALID WEZIREVIC

Capacity: /wwER

(see instruction # 8 on back of form)