Capacity:

(see instruction # 8 on back of form)

TFICATE OF ASSUMED BUSINESS.) (Please type or print legibly. See instructions on reverse.) TATE STATE OF IDAHO All 9: 18 CERTIFICATE OF ASSUMED BUSINESS NAME 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: Western States Sales 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 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): 208 687-9636 4. The name and address to which future orrespondence should be addressed: STERN STATES, SALES Submit Certificate of **Assumed Business** Name and \$20.00 fee to: 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 10/20/2000 09:00 CK: 2330 CT: 137486 BH: 355857 1 0 20.88 = 20.80 ASSUM NAME # 2 139861