

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

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.

99 JAN 13 AM 9:04
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

WESTERN REFRIGERATION SERVICE

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

W2122 Name

WRCS, LLC.

Complete Address

2311 WRIGHT AVE, SUITE A
P.O. BOX 2732
TWIN FALLS, ID 83303

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future Phone number (optional): 208-736-1600 correspondence should be addressed:

WESTERN REFRIGERATION SERVICE
AL GAMACHE
P.O. BOX 2732
TWIN FALLS, ID 83303

5. Name and address for this acknowledgement copy is (if other than #4 above):

Signature:

Alphonse R Gamache

Printed Name:

ALPHONSE R GAMACHE

Capacity:

(see instruction #8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334 2301

IDAHO SECRETARY OF STATE

01/13/1999 09:00
CL: 4650 CI: 109339 IN: 170372

1 @ 20.00 = 20.00 ASSUM NAME # 2

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