

CERTIFICATE OF Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name SECRETARY OF STATE OF IDAHO. ASSUMED BUSINESS NAME 3006 JAN -6 AM 9: 13

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| | Battery Distributors |
|---|---|
| business under the assumed bus Name J and T Ventures, Inc. | ress(es) of the entity or individual(s) doing ss name: Complete Address PO Box 476 - Star, ID 83669 |
| (C164140) | |
| Retail Trade Tran | Estate Name and \$25.00 fee to: Secretary of State |
| Battery Distributors | Basement West PO Box 83720 |
| PO Box 476 | Boise ID 83720-0080 208 334-2301 |
| Star, ID 83669 | |
| Name and address for this ackn copy is (if other than # 4 above). | ledgment Phone number (optional): |
| | Secretary of State use only |
| gnature: <u>UMU Kuals</u> (signature organized) Tami Ryals | CK: 97 CT: 195637 BH: 93054 |
| | IDAHO SECRETARY OF STATE 01/06/2006 05:0 |
| apacity/Title: President | CK: 97 CT: 195637 BH: 93054 |