

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2017 9CT 13 PH 1:56

Three Rivers Transpo	ort	SECRETARY OF STATE igned use(s) in the transaction are in the state in the state is:
	entity names and busines s name (do <u>not</u> include the na	s address(es) of those doing business under ame you listed in #1):
Daniel Garcia	193 N Riley Cree	ek rd, Laclede Idaho 83841
(Name)	(Äddress)	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
	Agriculture Manufacturir ure correspondence:	Mining Finance, Insurance, and Real Estate 5. Name and address for this acknowledgmer copy is (if other than # 4):
Daniel Garcia		
(Name)		(Name)
PO box 262 (Address)	<u></u>	(Address)
Laclede	ldaho 83841	
(City)	(State) (Zipcode)	(City) (State) (Zipcode
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		IDAHO SECRETARY OF STATE
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