

Capacity/Title: OWNET

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

2006 SEP 26 AM 8: 39

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

business is: Triple P Trucking	
The true name(s) and business address(es) of the business under the assumed business name:  Name  1000 Tyre! Per UNS	e entity or individual(s) doing  Complete Address
3. The general type of business transacted under th	ne assumed business name is:
Retail Trade  Wholesale Trade  Services  Manufacturing  Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  19517 Highway 30  Bunly 10 23314	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above).	Phone number (optional):  208-543-8367
	Secretary of State use only
nature: (eigneture required)	