

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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:

Mobile Transport Company

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

Name

Complete Address

Mahlon L Eastlick

1180 N Sugar Maple Trail

Jean M Eastlick

Post Falls, Id 83854

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

4. The name and address to which future correspondence should be addressed:

Mahlon Eastlick

Jean Eastlick

1180 Sugar Maple Trail

POST FALLS, ID 83854

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

Signature:

M. L. Eastlick

Printed Name:

MAHLON EASTLICK

Capacity:

OWNER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:
25.00

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

Secretary of State use only

IDAHO SECRETARY OF STATE
02/02/2007 05:00
CK: 3730552308 CT: 150010 BH: 1030549
1 @ 25.00 = 25.00 ASSUM NAME # 2

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