



# CERTIFICATE OF ASSUMED BUSINESS NAME

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.**

2004 OCT 14 AM 9:42

STATE OF IDAHO

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

Dan's Forklift Service and Repair

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

Name

Complete Address

Daniel Lee Goff

41607 Hwy 72 New Plymouth, ID 83655

Janice Odaline Goff

4607 Hwy 72 New Plymouth, ID 83655

3. The general type of business transacted under the assumed business name is:

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

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

Dan's Forklift Service & Repair  
4607 Hwy 72  
New Plymouth, ID. 83655

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):

Signature: Dan L Goff

(signature required)

Printed Name: Dan L. Goff

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/14/2004 05:00  
CK: 10001 CT: 150010 BH: 771079  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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