



# CERTIFICATE OF ASSUMED BUSINESS NAME

# FILED/EFFECTIVE

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.

02 FEB 11 AM 10: 25

STATE OF IDAHO

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

IDAHO TRAVEL ENTERPRISES

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

Name

ALONSO M. ORTIZ

Complete Address

471 RANDOLPH

POCATELLO, ID 83201

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:

ALONSO M. ORTIZ

471 RANDOLPH

POCATELLO, ID 83201

Submit Certificate of  
Assumed Business  
Name and **\$20.00** 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: Alonso M. Ortiz

Printed Name: ALONSO M. ORTIZ

Capacity: PRESIDENT

(see instruction # 8 on back of form)

Secretary of State use only

g:corpforms:abn.p65  
Revised 01/2001

IDaho SECRETARY OF STATE  
02/11/2002 05:00  
CK: 580 CT: 157166 BH: 445538  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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