

# 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:

J & S TRANSPORT Co.

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

<u>Name</u>	<u>Complete Address</u>
<u>JAMES N. NOE</u>	<u>801 Hwy 95 - WEISER, ID</u>
<u>SHARRON L. NOE</u>	<u>801 Hwy 95 - WEISER, ID</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

JAMES OR SHARRON NOE  
801 Hwy 95  
WEISER, ID 83672

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
 DATE 03/25/1997  
 0900 76213 2  
 CK #: no ck # CUST# 78760  
 ASSUM NAME 10 20.00= 20.00

#: D

Signature: Sharron L. Noe

Printed Name: SHARRON L. NOE

Capacity: MANAGER

(see instruction # 8 on back of form)