



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 AUG -3 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Sidewinder Express

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

Name

Michael B. Vance

Complete Address

905 Wandel Ct.

Blackfoot, Id. 83221

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

- | | |
|--|---|
| <input type="checkbox"/> Retail Trade | <input checked="" type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input 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:

Same As Above

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

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

Secretary of State
~~450 North 4th Street~~
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: Michael B. Vance

Printed Name: MICHAEL B. VANCE

Capacity/Title: OWNER

Signature: Michael B. Vance

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE
08/03/2012 05:00
CK: 5987 CT: 158818 DI: 1334668
1 @ 25.00 = 25.00 ASSUM NAME # 2

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