



CERTIFICATE OF ASSUMED BUSINESS NAME

2006 JAN 17 PM 1:30

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

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Ramirez transportation

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 |
|------------------------|--------------------------|
| <u>Isidro Ramirez</u> | <u>596 N. Rd.</u> |
| <u>Rosa A. Ramirez</u> | <u>Jerome, ID, 83338</u> |

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:

Rosa A. Ramirez
596 N. Rd.
Jerome Id, 83338.

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):

208-644-1642

Signature: Rosa A. Ramirez

(signature required)

Printed Name: Rosa A. Ramirez

Capacity/Title: owner's

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

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IDAHO SECRETARY OF STATE
01/18/2006 05:00
CK: 1583 CT: 158010 BH: 932498
1 @ 25.00 = 25.00 ASSUM NAME # 2