



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

2003 MAY 20 AM 8:37

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:

Hammon Trucking

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>Todd Hammon</u>	<u>5515 Highway 30 South, New Plymouth ID 83655</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:

Todd Hammon
5515 Highway 30 South
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):

Same as #4

Phone number (optional):
(208) 278-5887

Signature: Todd Hammon
(signature required)

Printed Name: Todd Hammon

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn forms\abn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE
 05/20/2003 05:00
 CK: 1207 CT: 150010 BH: 601570
 1 @ 25.00 = 25.00 ASSUM NAME # 2

D 65586