



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

09 MAR 20 AM 8:32

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:

ZARIC TRANSPORTATION

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

Name
STANISLAV ZARIC

Complete Address
283 HEYBURN AVE W
TWIN FALLS, ID 83301

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:

STANISLAV ZARIC

283 HEYBURN AVE W

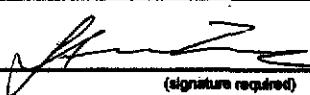
TWIN FALLS, ID 83301

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Signature: 
(signature required)

Printed Name: STANISLAV ZARIC

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Released 04/2003

Secretary of State use only

103/20/2009 05:00
CK: 2658 CT: 158810 BH: 1162164
10 25.00 = 25.00 ASSUM NAME # 2

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