	CERTIFICATE OF ASSU (Please type or print legibly.			
	To the SECRETARY OF STATE, STA Pursuant to Section 53-504, Ida gives notice of adoption of an A	aho (	Code,	AHO STATE THE STATE OF THE STAT
1.	The assumed business name which the unbusiness is:	nder	signed	d use(s) in the transaction o말
	Idahakan Trucking Idah	dka,	n 15	I word with IGR Ex. Folized
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	Roo Name		_	Complete Address
	•	163		Mue E, Tavin Felle, T. J. 8330
	Christing L Chandler		591	ne
3.	The general type of business transacted u	nder	the a	ssumed business name is:
	Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction			Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Phor	e nun	nber (optional): <u>208-731-37<b>74</b></u>
	IdahoRam Trucking 1633 Falls Ave E Twin Falls Idaho 83301-4112			Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgm copy is (if other than # 4 above):			Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		n 1/88		Secretary of State use only IDAHO SECRETARY OF STATE
Signatu	ire: Rod Chandles II	Revision 1/98		61/65/1999 69:00 CK: 2786 CT: 189117 3H: 175714
Printed Name: Rad Chandler II				1 0 20.00 = 20.00 ASSUM NAME 0 2
	ty: Owner (see instruction # 8 on back of form)	rpVorms\abn.p65		D21772