

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2003 OCT 20 PM 2:20

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:

Express Taxi

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

ROBERT (BOB) E. FLINT

3002 A W. Seltice

POST FALLS ID.

83854

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

4. The name and address to which future correspondence should be addressed:

Express Taxi
3002 A W. Seltice
POST FALLS ID. 83854

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

Express Taxi
1006 N Maranatha DR.
POST FALLS ID. 83854

Phone number (optional):

208-964-8899

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

Secretary of State use only

Signature: Robert E. Flint
(signature required)

Printed Name: ROBERT E. FLINT

Capacity/Title: OWNER

(see instruction # 8 on back of form)

9:\ncamp\forms\state\forms\sub\pac5
Revised 04/2003

IDAHO SECRETARY OF STATE
10/21/2003 05:00
CK: 3032 CT: 150010 BH: 707407
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 69890