

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

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Instructions are included on back of application. 1. The assumed business name which the undersigned use(s) in the transaction of business is: IIKI TRANSPORT 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address TOHN A DENTONE P.O. BOX 573 83616 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction 2 Services Agriculture Submit Certificate of | | Mining Assumed Business Finance, insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street OHN A DENTONE PO Box 83720 Boise ID 83720-0080 208 334-2301 EAGLE IDAHO 836KO 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature 2 Printed Name: John A Capacity/Title: OWNER

IDAHO SECRETARY OF STATE

D162463

Signature: ____

Capacity/Title:

Printed Name: