

Capacity/Title: Owner

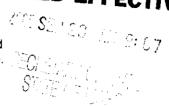
(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Please type or print legibly. NOTE: See instructions on reverse before filing.



The assumed business name which the undersigned business is: **Ram Transport** **Transport** **Transport*	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name **Rebecca A. Movel 97** **Western Control of the business address(es) of the business under the assumed business name: **Proposition** *	entity or individual(s) doing Complete Address 7 SMIH LA PISCY ID 83672
3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	
5. Name and address for this acknowledgment copy is (if other than # 4 above): BUNK OF FLE WEST BY EMEIN WEISER, ID \$36.72 Signature Release A Browne (signature required) Printed Name: Rebecca A More	Phone number (optional): Secretary of State use only

IDAHO SECRETARY OF STATE

09/23/2005 05:00

CK: 9901 CT: 158010 RH: 913210

1 0 25.00 = 25.00 ASSUM NAME # 2

