

Signature:_

Printed Name

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

10 FEB 11 AM 8: 36

FILED EFFECTIVE

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

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: John Pocock Truck Sales 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 John S. Pocock, LLC. 4483 E 2000 N Sugar City, ID 83448 3. The general type of business transacted under the assumed business name is: ▼ Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services ✓ Agriculture Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 John Pocock Truck Sales 2124 E 200 N (208) 334-2301 St. Anthony, ID 83445 5. Name and address for this acknowledgment CODY is (if other than # 4 above): John S. Pocock, LLC. 4483 E 2000 N Secretary of State use only Sugar City, ID 83448

coptomstabn formstabn.pt Revised 04/2003

John Pocock

Owner

(see instruction # 8 on back of form)

IDANO SECRETARY OF STATE

92/11/2018 95:00

CK: 24163 CT: 234472 BH: 1207728

1 8 25.00 = 25.00 ASSIM MARK 8:

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