## FILED EFFECTIVE



Capacity/Title: Owner

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

2005 OCT 10 PH 1: 18

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

SEGRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the und	dersigned use(s) in the transaction of
business is:	- //
HOE WILD TRUC	KING COMPANY
The true name(s) and <u>business</u> address(es) business under the assumed business name	
Name	Complete Address
Ernest Lee Howe	
	Parma I Parma
3. The general type of business transacted und	der the assumed business name is:
	and Public Utilities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
·	Basement West
Ernie Howe/HogWild Trucking	PO Box 83720 Boise ID 83720-0080
203 Park St. P.O. Box 1213	208 334-2301
tarma, 1d 83660	
5. Name and address for this acknowledgmer	nt Phone number (optional):
COPy is (if other than # 4 above):	724-9558
	_/27-/558
	Secretary of State use only
0	010421)
Signature: Linest Lee Howe (signature required)	10
Printed Name: Ernest Lee Howe	IDAHO SECRETARY OF STATE  10/10/2006 05:00  CK: 584 CT: 285289 BH: 979392  1 0 25.00 = 25.00 ASSUM NAME # 2
rimed Name: Friedrich / 106/8	では、