



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE
2004 SEP 27 AM 10:11

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:

Manuel Santos Trucking

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

Manuel Santos

665 Bedke Blvd., Burley, ID 83318

Irene H. Santos

665 Bedke Blvd., Burley, ID 83318

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Manuel Santos

P.O. Box 7

Heyburn, ID 83336

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

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

Phone number (optional):

Signature: _____

(signature required)

Printed Name: Manuel Santos

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn forms\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
09/27/2004 05:00
CK: 11451 CT: 182462 BH: 768119
1 @ 25.00 = 25.00 ASSUM NAME # 2