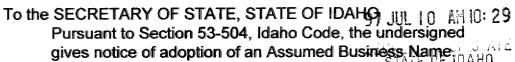
## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





gives notice of adoption of an Assumed Business Name in AHO	
The assumed business name which the undersigned us business is:      TABLE ROCK TRANSPORT	e(s) in the transaction of
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
CARL GREG CERVENKA 4857 HEAD	mplete Address HHWAY NAMI)A INA 8367
PAMELA CHRISTINE CERVENKA 4857	HEATHWAY NAMPA ID 836
<ol> <li>The general type of business transacted under the assu (mark only those that apply)</li> </ol>	med business name is:
☐ Wholesale Trade ☐ Agriculture ☐ Fin	nnsportation and Public Utilities ance, Insurance, and Real Estate ning
The name and address to which future Phone numbe correspondence should be addressed:	r (optional):
TABLE ROCK TRANSPORT 4857 HEATHWAY	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Nampa TDAHO 83687  5. Name and address for this acknowledgment copy is (if other than # 4 above).	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
	208 334-2301
	1866 SECRETARY OF STATE V
Signature (Varnela Christina Cervenza	CK: 2094 CT: 84075 3H: 19815 1 0 20.80 = 20.00 ASSUM NAME
Printed Name: Pamela Christine Coevenka  Capacity:	D625
Capacity:	

(see instruction # 8 on back of form)