

227



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 JAN 27 PM 2:30

SECRETARY OF STATE

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Secure Transport Services

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Billi Shockley 2652 E Mallon Ave #4 Post Falls Id. 83854
(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

☐ Retail Trade

☐ Wholesale Trade

☐ Services

☐ Construction

☐ Agriculture

☐ Manufacturing

☒ Transportation and Public Utilities

☐ Mining

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Billi Shockley
(Name)
2652 E Mallon Ave #4
(Address)
Post Falls Id 83854
(City) (State) (Zipcode)

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

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: Billi Shockley

Signature: Billi Shockley

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/27/2017 05:00

CK:4522684 CT:172099 BH:1566152

1@ 25.00 = 25.00 ASSUM NAME #2

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