



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

**FILED EFFECTIVE**

2018 FEB 28 AM 9:00

SECRETARY OF STATE  
STATE OF IDAHO

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

Sun Valley Shuttle and Limo

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):

Airport Cab Company, LLC 415 N 120 E Shoshone, ID 83352

(Name) W 34807 (Address)

(Name) \_\_\_\_\_ (Address) \_\_\_\_\_

(Name) \_\_\_\_\_ (Address) \_\_\_\_\_

(Name) \_\_\_\_\_ (Address) \_\_\_\_\_

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

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

4. Mailing address for future correspondence:

Airport Cab Company, LLC

(Name)

415 N 120 E

(Address)

Shoshone ID 83352

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Kirk Lindsey

Signature: [Signature]

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

03/01/2018 05:00

CK: 3467 CT: 244400 BH: 1629618  
1@ 25.00 = 25.00 ASSUM NAME #2

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