

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE STATE OF IDAHO ABO A

Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assumi	adio the constant of July
business is:	gned use(s) hother transaction of
CDA CART SERVICE	
The true name(s) and business address(es) of the business under the assumed business name is/a	re entity or individual(s) doing
Neffery J Wall 1229	Complete Address 4 N Kally RACIN HAYLON TO
RORY PRESNETC 10525	CRIMON DR. Hayden 83835
3. The general type of business transacted under the (mark only those that apply)	e assumed business name is:
Retail Trade Manufacturing Munufacturing Mun	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future Phone no correspondence should be addressed: 	umber (optional):
Noyder Id	Submit Certificate of Assumed Business Name and \$20.00 fee to:
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
ature:	Secretary of State use only

Signa

Printed Name:

Capacity:____ OWNER (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

04/04/2003 05:00

CK: 2366 CT: 158010 BH: 672932

1 0 20.00 = 20.00 ASSUM NAME # 2