

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

## Please type or print legibly. Instructions are included on back of application.

## FILED EFFECTIVE

2013 NOV 12: AM 9: 12

SECRETARY OF STATE STATE OF IDAHO

<ol> <li>The assumed business name which the ur business is:</li> </ol>	ndersigned use(s) in the transaction of
ON TIME TRANSPO	PT
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Andrei Sandor	S) of the entity or individual(s) doing ne:  Complete Address  708 S. CHESTNUT ST  NAMPA, ID 83686
3. The general type of business transacted ur  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of
4. The name and address to which future correspondence should be addressed:  Apple: Sandor  708 S. Chestput ST  Nampa, ID 83686	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt
Signature:	Secretary of State use only
Printed Name: ANDRE SANDOR	
Capacity/Title: OwneR	IDAHO SECRETARY OF STATE
Signature:	11/12/2013 05:00 CK: CASH CT: 158918 BH: 1397584
Printed Name: Capacity/Title:	1 9 25.00 = 25.00 ASSUM NAME 1 2  D 166969
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