FILED EFFECTIVE

CERTIFICATE OF

= 2015 OCT 14 PM 12: 04



	ASSUMED BUSINESS NAI Pursuant to Section 53-504, Idaho Code, the unders submits for filing a certificate of Assumed Business Please type or print legibly, nstructions are included on back of application	signed Name.	
1. The busi	assumed business name which the undersign iness is: Martin Mendoza Trucking	ned use(s) in the transaction of	
2. The busi	true name(s) and <u>business</u> address(es) of the iness under the assumed business name: Name Octivity Mendoza /	entity or individual(s) doing Complete Address Complete Address Complete Address	10 3061
3. The	general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		
	name and address to which future espondence should be addressed: 144 1000000000000000000000000000000000	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
	ne and address for this acknowledgment y is (if other than # 4 above):		
Printed Na	Multi Madao ame: MARTIN Mendon	Secretary of State use only	
Capacity/Title: On no r/Operostor Signature:		IDAHO SECRETARY OF STATE	
-		10/14/2015 05: CK:3284434 CT:172099 BF	
Printed Name:		1@ 25.00 = 25.00 ASSUM NAME #2	

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