

CERTIFICATE OF

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

Please type or print Issued Business Name.

07 APR 24 PM 3: 48

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

MOTE. Occ mondentions on reverse perore ming.	SECRETARY OF STATE
1. The assumed husiness name which the undersigned	STATE OF IDAHO
 The assumed business name which the undersigned business is: 	use(s) in the transaction of
G Transport Como	anu
- Thorsport Conf	
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name:	
Name	Complete Address
Mirsada Jasarevic 1250) E. Grand Canyon St.
Mer	1 dian, 1D 83646
3. The general type of business transacted under the a	ssumed business name is:
☐ Retail Trade ☐ Transportation and Pub	olic Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	450 North 4th Street
Mirsada Tasaravic	PO Box 83720 Boise ID 83720-0080
1250 E. Grand annum st.	208 334-2301
MACI MI AN ID AZMIL	
··CII (II GIII ID 05)54	.
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than # 4 above):	208)272-1161
	Secretary of State use only
Signature: Musado Jasanev CO Printed Name: MIRSADA JASAREVIC Capacity/Title: OWNEY	
Printed Name: MIRSADA JASAREVIC	IDAHO SECRETARY OF STATE
Capacity/Title: 0 W ner	CK: CASH CT: 158818 BH: 1849283 1 8 25.88 = 25.88 ASSUM MANE 8 2
(see instruction # 8 on back of form)	Durson
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