



# 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.

NOTE: See instructions on reverse before filing.

**FILED EFFECTIVE**

2003 MAY 30 AM 9:12

SECRETARY OF STATE  
STATE OF IDAHO

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

WARE TRUCKING

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

ANDREW RYAN WARE

Box 3381 KETCHUM, ID 83340

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

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

4. The name and address to which future correspondence should be addressed:

ANDY WARE

Box 3381 KETCHUM, ID  
83340

Submit Certificate of  
Assumed Business  
Name and ~~\$20.00~~ fee to:  
**\$25.00**

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Phone number (optional):

Signature: Andy Ware

(signature required)

Printed Name: ANDY WARE

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporate\forms\abn.p65  
Revised 09/2002

IDAHO SECRETARY OF STATE  
**05/30/2003 05:00**  
CK: 595 CT: 158010 BH: 603354  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 65858