

Printed Name:

Signature:

Signature:___

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

FILED EFFECTIVE

2017 JUN 15 AM 8:51

Filing fee: \$25.00. SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business 14. Haskins Trucking 2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): Jack W. Haskins 49 W Garfield Ave. Glenns Ferry, ID 83623 (Name) (Address) (Name) (Address) (Name) (Address) (Name) (Address) 3. The general type of business transacted under the assumed business name is: Retail Trade Construction |X| Transportation and Public Utilities Agriculture Wholesale Trade Mining Services Manufacturing Finance, Insurance, and Real Estate 4. Mailing address for future correspondence: 5. Name and address for this acknowledgment COPY is (if other than # 4): Jack W. Haskins (Name) (Name) PO Box 202 (Address) (Address) Glenns Ferry, 1D 83623 (City) (Zipcode) (State) (City) (State) (Zipcode) Printed Name: Jack W. Haskins Secretary of State use only Signature:

Rev. 08/2015

IDAHO SECRETARY OF STATE 06/15/2017 05:00 CK:115 CT:341236 BH:1589114 $16\ 25.00 = 25.00$ ASSUM NAME #2

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