



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

06 MAR -1 PM 2: 58

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

BUGTOWN DIESEL MECHANICS

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

DOYLE D. LADMAN

3804 ARTHUR ST. CALDWELL, ID 83605

LISA L. HAMMOND

3804 ARTHUR ST. CALDWELL, ID 83605

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 type="checkbox"/> Construction |
| <input checked="" 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:

BUGTOWN DIESEL MECHANICS

3804 ARTHUR ST.

CALDWELL, IDAHO 83605

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

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: _____

(signature required)

Printed Name: _____

DOYLE D. LADMAN

Capacity/Title: _____

MANAGER

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

1297031
IDAHO SECRETARY OF STATE
03/02/2006 05:00
CK: 547 CT: 1974% BH: 940520
1 @ 25.00 = 25.00 ASSUM NAME # 2