



# 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.**

2004 JUL 27 P 2:35

SECRETARY OF STATE  
STATE OF IDAHO

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

Power Vending

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

MOPAX LLC

Complete Address

2684 S. Zims Pl Meridian, ID 83642

W 32173

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

- ☒ Retail Trade  
☐ Wholesale Trade  
☐ Services  
☐ Manufacturing  
☐ Finance, Insurance, and Real Estate
- ☐ Transportation and Public Utilities  
☐ Construction  
☐ Agriculture  
☐ Mining

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

Paxton M Powers

2684 S. Zims Pl Meridian, ID 83642

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: *PMP*

(signature required)

Printed Name:

Paxton M Powers

Capacity/Title:

President

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE  
07/27/2004 05:00  
CK: 5113 CT: 177666 BH: 757719  
1 @ 25.00 = 25.00 ASSUM NAME # 3

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