

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2005 NOV 25 AM 9:24

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:

T Express

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

| <u>Name</u>           | <u>Complete Address</u>    |
|-----------------------|----------------------------|
| <u>Blake Tompkins</u> | <u>1416 S Boundary St.</u> |
|                       | <u>Nampa ID 83686</u>      |

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 |  |

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

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

1416 S. Boundary St  
Nampa ID 83686

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

Phone number (optional):

Secretary of State use only

Signature: Blake Tompkins  
(signature required)

Printed Name: BLAKE TOMPKINS

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\app\secretary\forms\assump.pdf  
Revised 04/2003

IDAHO SECRETARY OF STATE  
11/25/2005 05:00  
CK: 935 CT: 158010 BH: 923745  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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