

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

Anderson Trucking

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

<u>Name</u>	<u>Complete Address</u>
<u>Roger Anderson</u>	<u>523 Eastgate, Twin Falls, Idaho 83301</u>
<u>Carla Anderson</u>	<u>523 Eastgate, Twin Falls, Idaho 83301</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

Roger Anderson

P.O. Box 2457

Twin Falls, Idaho 83303

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

U.S. Bank

P.O. Box 509

Twin Falls, Idaho 83303-0509

Signature: Roger Anderson

Printed Name: Roger Anderson

Capacity: Owner

(see instruction # 6 on back of form)

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

08/08/1997 09:00
CR: 1607 CT: 1250 MW: 20192

1 @ 20.00 = 20.00 ASSUM NAME

0.7032