



CERTIFICATE OF ASSUMED BUSINESS NAME

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

03 MAR 24 PM 1:23

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:

Youngblood Trucking

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
<u>Craig T. Youngblood</u>	<u>6850 McGlochlin st</u>
	<u>Boise, ID 83709</u>

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

<input type="checkbox"/> Retail Trade	<input checked="" type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input 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:

Same as above

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

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

Phone number (optional):

FILED EFFECTIVE
Secretary of State use only

Signature: Craig T. Youngblood
(signature required)

Printed Name: Craig T. Youngblood

Capacity/Title:

(see instruction # 8 on back of form)

Idaho Form 500
Revised 09/2002

IDaho SECRETARY OF STATE
03/25/2003 05:00
CK: CASH CT: 158010 BH: 670681
1 e 20.00 = 20.00 ASSUM NAME # 2

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