

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 JAN 18 AM 9:25

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:

~~Preston Express~~ Preston Express

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

Mike Preston

725 North 3400 East

Meran Idaho 83434

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 checked="" 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:

Mike Preston  
725 North 3400 East  
Meran Idaho 83434

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):

208-521-4472

Secretary of State use only

Signature: Mike Preston  
(signature required)

Printed Name: Mike Preston

Capacity/Title: owner

(see instruction # 8 on back of form)

g:\corporate\state\form\assumed.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
01/18/2007 05:00  
CK: 48972711051 CT: 158010 BH: 1826956  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D107252