

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 JUN -7 PM 2:01

Please type or print legibly.

NOTE: See instructions on reverse before filling.

(see instruction # 8 on back of form)

2. The true name(s) and business address(e business under the assumed business na Name	ame:
Travis Stigall	Complete Address
	Cidton, Id 83822
3. The general type of business transported at	
Tra	
Retail Trade Transportation Wholesale Trade Construction	on and Public Utilities
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Travis Sting 11	Basement West PO Box 83720
421 S. Newport Are	Boise ID 83720-0080
Newport, Wa. 99156	208 334-2301
5. Name and address for this acknowledgme	ent Phone number (optional):
COpy is (if other than #4 above):	(sa) 447-4585
	Secretary of State use only
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gnature: Cum's Au	ZZ Edward
inted Name: Tavis Still	Piformalabn formelabn p86 Revised 04/2003

IDANO SECRETARY OF STATE 96/97/2004 95:00 CK: 1162 CT: 150018 BH: 749117 1 0 25.00 = 25.00 ASSUM NAME # 2

