

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 DEC 23 AM 8: 36

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	business is:		ndersigned use(s) in the transaction of	
	DESERT COUNTRY (Truck Services)			
2.	The true name(s) and <u>business</u> address(e business under the assumed business name <u>Name</u>			
	Rod L. Poe		3289 E. Sweetwater Dr.	
			Boise, Idaho 83716	
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade Transportation		n and Public Utilities	
	Wholesale Trade	Construction		
	✓ Services	Agriculture	Submit Certificate of Assumed Business	
	Manufacturing	Mining		
	Finance, Insurance,	and Real Estate		
4.	The name and address to which future correspondence should be addressed:		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
	Rod L. Poe (Manager) 3289 E. Sweetwater Dr. Boise, ID. 83716			
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		nt	
Signa	ature: Vol 1/		Secretary of State use only	
	ed Name: Rod L. Poe		•	
Capa	city/Title: Manager/Owner		YANIN PERPETADU PE PEATE	
	ignature:		IDAHO SECRETARY OF STATE 12/23/2010 05:00 CK: 6532 CT: 158810 BH: 1252173	
^o rinte	ed Name:		1 0 25.00 = 25.00 ASSUM NAME W	

abn.pmd Rev.07/2010