

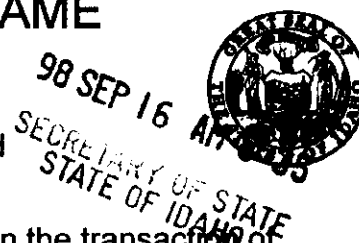
FILED

# 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:

J.C. TRANSPORT

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>JAMES E. CUNHA</u>	<u>P.O. BOX 593 ALBION, ID 83311</u>
<u>MAY E. CUNHA</u>	<u>P.O. BOX 593 ALBION, ID 83311</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): (208) 673-6238

JAMES E. CUNHA

P.O. BOX 593

ALBION, ID 83311

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

JAMES E. CUNHA

P.O. BOX 593

ALBION, ID 83311

Signature: James E. Cunha

Printed Name: JAMES E. CUNHA

Capacity: OWNER/OPERATOR

(see instruction # 8 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

09/16/1998 09:00  
CX: 4591 CT: 104068 BH: 145614

1 @ 20.00 = 20.00 ASSUM NAME # 2

D18264

Revision 2/97

g:\copforms\abn.pmf