FILED EFFECTIVE



Printed Name:

(see instruction #8 on back of form)

Capacity:

CERTIFICATE OF APR 28 PM 2: 3T ASSUMED BUSINESS NAME NATE

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

Please type or print legibly.

NOTE: See instructions on reverse belove that s.	
 The assumed business name which the undersigne 	d use(s) in the transaction of
I. The assumed business harne which the	
business is:	
SunRise Express	
	u individual(s) doing
2. The true name(s) and business address(es) of the e	ntity or individual(s) doing
business under the assumed business name:	A LA Addross
\$ 1====	Complete Address
al- Voor Abod to chaupy	4336 H N 1200 E
	uhl ID 83316
/	unc + D
3. The general type of business transacted under the	assumed business riding is:
Retail Trade Transportation and Po	TDIIC Omines
Wholesale Trade Construction	
	Submit Certificate of
D	Assumed Business
Manufacturing Mining	Name and \$20.00 fee to:
Finance, Insurance, and Real Estate	
	Secretary of State
4. The name and address to which future	700 West Jefferson
correspondence should be addressed:	Basement West
SUDDISO EXDERSS:	PO Box 83720
SUNKISE CAPTURE	Boise ID 83720-0080
1336 H W 1000 E	208 334-2301
Bubl TD 83516	
	Phone number (optional):
Name and address for this acknowledgment	208.420.4869
copy is (if other than # 4 above):	200. 100
	Secretary of State use only
	-
1011	
ignature: Nadfoct	
Alalan Madta lanta	IDAHO SECRETARY OF STATE OF ST
rinted Name: TTIERSEY NAMED OF THE	OX: A11 OT: 15ABIAD BN: 6

04/29/2003 05:00 CX: 811 CT: 150010 BH: 677433 0 25.00 = 25.00 ASSUM MANE # 2