



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED / EFFECTIVE
2003 FEB 18 AM 9:13

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

M & J EXPRESS M & J 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

Michael S. Squires

PO Box 84 Hansen, Idaho 83334

Jody R. Bliss

PO Box 84 Hansen, Idaho 83334

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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:

M & J EXPRESS

PO BOX 84

HANSEN, IDAHO 83334

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

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

Phone number (optional):

208-423-6234

Signature: Michael S. Squires

(signature required)

Printed Name: Michael S. Squires

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\compforms\abn forms\abn.p65
Revised 09/2002

IDAHO SECRETARY OF STATE
02/18/2003 05:00
CK: 6170 CT: 158010 BH: 663240
1 @ 20.00 = 20.00 ASSUM NAME # 2

D 62547