FILED EFFECTIVE



Capacity/Title: Owner / Operator

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2011 SEP -7 PM 1: 10 SECRETARY OF STATE STATE OF IDAHO

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

		en Trucking
2. T	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
	<u>Name</u>	Complete Address
	Rivera-Rivera, Jose L	404 E Kearney St Caldwell, Idaho 83605
3.	☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture	der the assumed business name is: and Public Utilities Submit Certificate of
	Manufacturing Mining Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
- -	The name and address to which future correspondence should be addressed: Vicke Huston / agent BVTRS Inc 11839 Orchard Ave Nampa, Idaho 83651	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
(Name and address for this acknowledgment copy is (if other than #4 above): Same as #4	t
		Secretary of State use only
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apaci	ity/Title:	
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rintad	Name Jose L Rivera-Rivera	IDAHO SECRETARY OF STATE

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09/07/2011 05:00 CK: 778201 CT: 172099 BH: 1269477 1 9 25.00 = 25.00 ASSUM NAME # 2