## TFICATE OF ASSUMED BUSINESS WOLLD (Please type or print legibly. See instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions on reverse (Please type or print legibly. See Instructions or print legibly. See Instructions (Please type or print legibly.) CERTIFICATE OF ASSUMED BUSINESS NAME To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section 54-604, Idaho Code, the undersigned Pursuant to Section 54-604, Idaho Code, Id 1. The assumed business name which the undersigned use(s) in the transaction of business is: Double DW 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: Complete Address Name 505 N Center Oakley, ID 83346 Duane Wadsworth 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining Services 4. The name and address to which future Phone number (optional): \_\_\_\_\_ correspondence should be addressed: Duane Wadsworth Submit Certificate of Assumed Business 505 N Center Name and \$20.00 fee to: Oakley, ID 83346 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODV IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 D.L. Evans Bank P.O. Box 1188 Secretary of State use only 2281 Overland **Burley, ID 83318**

Signature: -

Printed Name:

Capacity: (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE CK: 980492 CT: 158019 BH: 644108 8 20.00 = 20.00 ASSUN NAME # 2

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