

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the business is:	
2. The true name(s) and <u>business</u> address business under the assumed business Name TRAVIS CHARTERS	
Retail Trade Transporta Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Est 4. The name and address to which future correspondence should be addressed: TRAUS CHARTERS 850 WILLIAMSON W. EAGLE TO 83016	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above): Signature:	Secretary of State use only
Printed Name: TRAUIS J. CHARTERS Capacity/Title: OWNER OPERATOR Signature: Printed Name: Capacity/Title:	IDAHO SECRETARY OF STATE 08/12/2010 05:00 CK: 494010 CT: 172099 BH: 1234523 1 9 25.00 = 25.00 ASSUM NAME # 2
Capacity/ Itilo.	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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