## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

06 SEP -6 PM 2: 40

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

	STATE OF IDAHO
<ol> <li>The assumed business name which the unclean</li> </ol>	dersigned use(s) in the transaction of
business is:	, and the state of
DAWSON'S Transpo	rtation Socuices
	ATHION OFFICES
2. The true name(s) and business address(es	of the entity or individual(s) doing
business under the assumed business nam	e:
Name	Complete Address
WAde JAWSON	· · · · · · · · · · · · · · · · · · ·
TV HOC OHOUSEN	581 E. Forest Ridge Drive
<ol><li>The general type of business transacted und</li></ol>	der the assumed business name is:
	1.P. 1.P. 1.1111111
	and Public Utilities
Wholesale Trade Construction	
	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
	•
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Wade DAWSON	Basement West PO Box 83720
581 E. Forest Ridge Drive	Boise ID 83720-0080
	208 334-2301
Meridian, Id. 83642	
5. Name and address for this acknowledgmer	nt Phone number (optional):
COpy is (if other than # 4 above):	it inche fiditibes (optional).
	:
	· · · · · · · · · · · · · · · · · · ·
	Secretary of State use only
-	
	8
Signature: (Vade Nawton)	44 B
(eignature required)	04/20
Printed Name: Wade Dawson	IDAHO SECRETARY OF STATE  89/06/2006 05:00  CX: CASH CT: 150018 NN: 977778
Capacity/Title: President / CEO	IDAHO SECRETARY OF STATE  ##################################
(see instruction # 8 on back of form)	A

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