

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 OCT 16 AM 9: 17

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

(see instruction # 8 on back of form)

NOTE: See instructions on reverse before filing.	an of Assets
The assumed business name which the undersigned use(s) in the tra	nsaction of them
business is:	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Gons Semodal & Gepair	
2. The true name(s) and business address(es) of the entity or individual	(s) doing
business under the assumed business name: Name Complete Addr	ess
Gorald Nale Cox 505 24th St.	NSCH 5# 218
Leviston T	daho
	<u>873501</u>
3. The general type of business transacted under the assumed business	s name is:
Retail Trade Transportation and Public Utilities	•
Retail Trade Transportation and Public Utilities Wholesale Trade X Construction	
Services Agriculture Submit Certific	cate of
☐ Manufacturing ☐ Mining Assumed Busi	iness
Finance, Insurance, and Real Estate Name and \$25	:
4. The name and address to which future Idaho Secretary 450 N 4th Stree	
correspondence should be addressed: PO Box 83720 Boise ID 83720-	-0080
<u>5 ane as 2</u> (208) 334-2301	
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5. Name and address for this acknowledgment	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Secretary of	of State use only
<u> </u>	
nature: Rould D. Con 18 8	
nature:	TOAHO SECRETARY OF STATE
10	/16/2008 05:00