



# 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.

01 JUN 18 AM 9:19

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Double T Transport

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Mark C. Dapson

8 Heather Ln. Carmen, ID 83462

Michele Dapson

8 Heather Ln. Carmen, ID 83462

3. The general type of business transacted under the assumed business name is:

- |                                                              |                                                                         |
|--------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade                        | <input checked="" type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                                   |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                                    |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                                         |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |                                                                         |

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

4. The name and address to which future correspondence should be addressed:

Double T Transport

Mark C. Dapson

8 Heather Ln.

Carmen, id 83462

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

(208) 756-6790

Signature: [Signature]

Printed Name: DAPSON, MARK C

Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

06/18/2001 09:00  
CK: 3120 CT: 147750 DN: 403363

1 @ 20.00 = 20.00 ASSUM NAME # 2

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