

**FILED EFFECTIVE**

11 MAR -3 AM 8:27

SECRETARY OF STATE  
STATE OF IDAHO

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

## Safe Ride ~~and~~ Shuttle

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

### Complete Address

Irven Hill

407 N. 4083 E.

Rigby Vd 83442

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

- ☐ Retail Trade      ☒ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

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

Irven Hill

407 N. 4083 E Rigby, ID

83442

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

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

Phone number (optional):

Signature: \_\_\_\_\_

Printed Name:

Capacity/Title: Owner

(see instruction # 8 on back of form)

**Secretary of State use only**

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Revised 04/2003

IDAND SECRETARY OF STATE

03/03/2011 05:00

CK: 1271 CT: 158010 DH: 1262467  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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