

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2013 MAR 12 PM 2: 02

SECRETARY OF STATE STATE OF IDAHO

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

The assumed business name which the u business is: WILKINSON LAW	ndersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e business under the assumed business na Name Law Office of John H. Wilkinson, PLLC (W114091)	es) of the entity or individual(s) doing me: <u>Complete Address</u> 1850 N. Lakes Place, Meridian, ID 83646
Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: John Wilkinson 1850 N. Lakes Place Meridian, ID 83646	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	
Signature: John H. Wilkinson Capacity/Title: Owner	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 93/13/2013 95:00
Printed Name: Capacity/Title:	CK: CASH CT: 270578 BH: 1364295 1 @ 25.00 = 25.00 ASSUM MAME # 2

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