

Capacity/Title: Manager

9/21/2012

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## 2013 OCT -8 PM 3: 20 SECRETARY OF STATE STATE OF IDAHO

FILED EFFECTIVE

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

CollegeAlumniGear.com	
2. The true name(s) and <u>business</u> business under the assumed bu	address(es) of the entity or individual(s) doing siness name:
<u>Name</u>	Complete Address
JAP LLC	5937 N. Red Hills Ave., Meridian, ID 83646
W 129618	
Retail Trade Tra Wholesale Trade Co	nsacted under the assumed business name is: nsportation and Public Utilities nstruction
	riculture  Submit Certificate of  Assumed Business  Page 1 Estate Name and \$25.00 fee to:
<ol> <li>The name and address to which correspondence should be address</li> <li>Joseph S. Kozlowski</li> </ol>	future Socretory of State
136 E. Idaho Ave., Suite 203	Boise ID 83720-0080
Meridian, ID 83642	208 334-2301
<ol> <li>Name and address for this acknowledge.</li> <li>Copy is (if other than # 4 above):</li> </ol>	wledgment
A I M	Secretary of State use only
ignature:	
rinted Name: Alicia D. Piccione	
apacity/Title: Manager	
ignature:	IDAHO SECRETARY OF STATE 10/09/2013 05:00
rinted Name: Joel K. Piccione	CK: 1033 CT: 287220 BH: 1393238 1 0 25.00 = 25.00 ASSUM NAME #