

## 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.

2815 MAY 21 AM 8: 29

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

The true name(s) and <u>business</u> address(e business under the assumed business na <u>Name</u> Jordan Reynolds	
The general type of business transacted usiness transacted usiness transacted usiness transacted usiness. Transportation with the construction of	under the assumed business name is: on and Public Utilities on Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:  Jordan Reynolds  3134 Chasewood Dr APT 2  Ammon, ID 83406	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgme copy is (if other than # 4 above):	ent

IDAHO SECRETARY OF STATE 05/21/2015 05:00

CK:1035737509 CT:310477 BH:1476408 16 25.00 = 25.00 ASSUM NAME #2

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Capacity/Title: Sole-Prop

Capacity/Title: \_\_\_\_\_

Signature:

Printed Name: \_\_\_\_\_