



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2004 APR 21 AM 8:48

SECRETARY OF STATE
STATE OF IDAHO

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

Jensen Financial Solutions

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

Name

Scott Jensen

Complete Address

30 E Franklin Rd #10

Meridian, ID 83642

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:

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:

30 E Franklin Rd #10

Meridian, ID 83642

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

Phone number (optional):

Secretary of State use only

Signature:

Printed Name:

Scott Jensen

Capacity/Title:

Owner

(see instruction # 5 on back of form)

IDAHO SECRETARY OF STATE
04/21/2004 05:00
CK: 4248 CT: 150010 BH: 740557
1 @ 25.00 = 25.00 ASSUM NAME # 2

75600