## **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.



2007 JUN 22 AM 8: 50

SECRETARY OF STATE STATE OF IDAHO

| The true name(s) and business address(e business under the assumed business na Name  |  |
|--|--|
| Jacob I. Briggs  | 970 Plommon Circle   |
| <u> </u>   | Idaho Falls, ID 83402  |
|  |  |
| The general type of business transacted u  | under the assumed business name is:  |
|  | on and Public Utilities  |
| Retail Trade I ransportation  Wholesale Trade Construction   |  |
| <ul> <li>☒ Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Estat</li> </ul> | Submit Certificate of Assumed Business Name and \$25.00 fee to:  |
| The name and address to which future correspondence should be addressed:   | Secretary of State 700 West Jefferson Basement West  |
| Jocob Briggs   | PO Box 83720   |
| 970 Plommon Circle<br>Fdaho Falls, ID 8340   | Boise ID 83720-0080<br>208 334-2301  |
| 5. Name and address for this acknowledge   | Physical control of the state o |
| COPY IS (if other than # 4 above).   | (208)-716-0785   |
|  | Secretary of State use only  |
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