CERTIFICATE OF	
ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a contificate of A	
submits for filing a certificate of Assumed B <u>Please type or print legibly.</u>	Business Name. 03 JUN - 4 AM 10: 44
NOTE: See Instructions on reverse befor	JIAIC UP IDAHU
 The assumed business name which the und business is: 	lersigned use(s) in the transaction of
JDA CONSTRUCTION	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name <u>Name</u> <u>JAMES D. ALBERICO</u>	of the entity or individual(s) doing <u>Complete Address</u> <u>2190 W. TRESTLE DR.</u> <u>MERIDIAN, IDAHO 83642</u>
 3. The general type of business transacted under the services of the	er the assumed business name is: and Public Utilities 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 Phone number (optional): <u>208 (631-3430</u>
	Secretary of State use only
ignature: <u>James Willing</u> rinted Name: <u>James D. Aubercico</u> apacity/Title: <u>OWNER</u> (see instruction # 8 on back of form)	