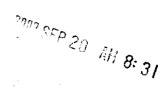


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly. structions on reverse before filing.



NOTE: See instructions on reverse before ming.	ONE PER LE
The assumed business name which the undersigned The increase is:	use(s) in the transaction of
business is:	•
Jake Larsen Construction	
The true name(s) and <u>business</u> address(es) of the entities business under the assumed business name: Name	tity or individual(s) doing Complete Address
	27th E Idaho Falls, ID 8340
JT Companies, LLC 10049 N	21 th 1 1 1 1 1 1 1 1 1 2 0 1 0
3. The general type of business transacted under the a	ssumed business name is:
Retail Trade Transportation and Public Wholesale Trade X Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 10049 N 27th F Idaho Falls, ID 83401 5. Name and address for this acknowledgment copy is (if other than # 4 above): Allied Financial Services	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
PO Box 674	Secretary of State use only
istan p	
Signature:	
Printed Name: Jacob K Larsen	
Rexhurg, ID 83440 Signature: Printed Name: Jacob Larsen Capacity: (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 99/20/2002 05:00 CK: 2700 CT: 87111 BH: 489434 1 0 26.00 = 20.00 ASSUM NAME #
	TO TO TO HOUSE MAINE &
	D 58459