27	FILLENIVE
CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code. submits for filing a certificate of Assumed Please type or print legibly.	= SNAME AUG 23 Ph 3: 31
NOTE: See instructions on reverse before	
 The assumed business name which the ur business is: Jaz-Up F 	ndersigned use(s) in the transaction of Professionals
2. The true name(s) and business address(es	s) of the optity or individual(a) doin a
business under the assumed business nan Name Premier Properties, Inc.	ne: Complete Address P. O. Box 966, Eagle, ID 83616
C 93656	
 3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Jaz-Up Professionals P. O. Box 966 Eagle, ID 83616 5. Name and address for this acknowledgme 	n 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
COPY IS (if other than # 4 above).	
Signature: Lette WTD	Secretary of State use only
Printed Name:	IDAHO SECRETARY OF STATE 08/24/2004 05::00 00 08/24/2004 05::00 00 08::01 08::01 08::00 08::01 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 08::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00 09::02 08::00 08::00
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