

Capacity/Title:\_\_

## ASSUMED BUSINESS NAME

1277 16 AL OF 40

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

Please type or print legibly. Instructions are included on back of application.

business is:	official California
CPC	ollection Solutions
2. The true name(s) and <u>business</u> address business under the assumed business Name  JAM Of Idaho, Inc	
3. The general type of business transacte	ed under the assumed business name is:
	ation and Public Utilities tion
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real Es	Assumed Business state Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Jerre Fender, President  1928 Maple Avenue  Twin Falls, ID 83301	Secretary of State
i. Name and address for this acknowledge	gment
CODY is (if other than # 4 above).	<del></del>
	Secretary of State use only
nature:	{
nted Name: Jerre Fender	
pacity/Title: President	
nature:	
nted Name:	IDAHO SECRETARY OF STATE  Ø2/14/2012 Ø5:0
pacity/Title:	CK: 2598 CT: 182209 BH: 1310
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