

FILED EFFECTIVE

2007 AUG -2 AM 10:30
SECRETARY OF STATE OF IDAHO

227



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.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

CJ RECOVERY MANAGEMENT

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Charles Ray Stewart JR</u>	<u>304 W 4th AVE #41</u>
	<u>POST FALLS ID 83854</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

CJ RECOVERY MANAGEMENT
304 W 4th AVE #41
POST FALLS ID 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Charles Ray Stewart Jr.
(signature required)

Printed Name: Charles Ray Stewart JR.

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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):
(208) 964-4054
(800) 565-4617 EXT 103

Secretary of State use only

IDAHO SECRETARY OF STATE
08/02/2007 05:00
CK: 1233742 CT: 172899 BH: 1868799
1 @ 25.00 = 25.00 ASSUM NAME # 2

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