



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

JCCDS Enterprises

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

Name

Complete Address

Jerrica Lloyd
Cody James Lloyd
Cassidy Lloyd
Dillon James Lloyd
Sydney Lloyd

1394 Mojave St.
Idaho Falls, Id 83404

3. The general type of business transacted under the assumed business name is (mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

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

Phone number (optional) (208) 522-4912

JCCDS Enterprises
C/O Gordon Lloyd
1394 Mojave St.

Idaho Falls, Id 83404

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

09/09/1999 09:00
CK: 1001 CT: 120278 BH: 248440

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Jerrica Lloyd

Printed Name: Jerrica Lloyd

Capacity: Guardian Partner

(see instruction # 8 on back of form)

029031