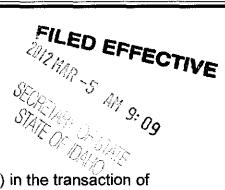


CERTIFICATE OF ASSUMED BUSINESS NAME

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

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



J	T Consulting
The true name(s) and <u>business</u> address business under the assumed business in <u>Name</u> James Toney	
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Constructi Services Agriculture Manufacturing Mining	ation and Public Utilities ion
Finance, Insurance, and Real Est. 4. The name and address to which future correspondence should be addressed: James Toney PO 122 North Fork ID 83466	
5. Name and address for this acknowledge copy is (if other than # 4 above):	ment
	Secretary of State use only
inted Name: James Toney	_
apacity/Title: Sole Proprietor	IDAHO SECRETARY OF STATE
gnature:	03/05/2012 05:00 CK: 1262 CT: 267789 BH: 1313404
inted Name:	1 0 25.00 = 25.00 ASSUM NAME # 3

abn.pmd Rev. 07/2010

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