



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 APR 24 AM 10:41

SECRETARY OF STATE
STATE OF IDAHO

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

Teton Training Center

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

JC & JC, LLC W179805 528 Valley Centre Dr. Ste 1. Driggs, ID. 83422

(Name) (Address)

John L Coakley 528 Valley Centre Dr. Ste 1. Driggs, ID. 83422

(Name) (Address)

Jessica A Coakley 528 Valley Centre Dr. Ste 1. Driggs, ID. 83422

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

JC & JC, LLC

(Name)

528 Valley Centre Dr. Ste. 1

(Address)

Driggs, ID. 83422

(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: John L Coakley

Signature: [Signature]

Printed Name: Jessica A Coakley

Signature: [Signature]

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/24/2017 05:00

CK:1606 CT:337362 BH:1580643
1@ 25.00 = 25.00 ASSUM NAME #2

D193908