

## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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.

JBA	Ainc.
The true name(s) and business address(es) business under the assumed business name     Name     JB Associates, Inc.	of the entity or individual(s) doing e: Complete Address PO Box 2923, McCall, ID 83638
3. The general type of business transacted und  Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  JBA Inc.	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720
PO Box 2923 McCall, ID 83638	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	t Phone number (optional):  208 634-2110
	Secretary of State use only
rinted Name: Jessica Burke  apacity/Title: President  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  100000000000000000000000000000000000