

CERTIFICATE OF ASSUMED BUSINESS NAME

08 JAN -9 AM 8: 24

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2. The true name(s) and busin	ece address(es)	of the ent	ity or individual(s) doing	
The true name(s) and busin business under the assume	d business name): :	ity of filateladal(s) doing	
Name			Complete Address	
Jamle Burke			854 E. Stormy DR	
			Meridian, ID 83646	
3. The general type of busines	s transacted und	er the as	sumed business name is:	
Retail Trade	Transportation	and Public	CUtilities	
Wholesale Trade	Construction	Г		•
Services	Agriculture		Submit Certificate of	
	: I fimima		Accumed Rusiness	
Manufacturing Engage	Mining		Assumed Business Name and \$25.00 fee to:	
Finance, Insurance, a	ind Real Estate		•	
Finance, Insurance, a 4. The name and address to v	and Real Estate which future		•	
Finance, Insurance, a 4. The name and address to v correspondence should be	and Real Estate which future		•	
Finance, Insurance, a 4. The name and address to v correspondence should be Jamle Burke	and Real Estate which future		•	
Finance, Insurance, a 4. The name and address to v correspondence should be Jamie Burke 854 E. Stormy DR	and Real Estate which future		•	
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Finance, Insurance, a 4. The name and address to v correspondence should be Jamie Burke 854 E. Stormy DR Meridian, ID 83646 5. Name and address for this	und Real Estate which future addressed:	nt	•	
Finance, Insurance, a 4. The name and address to v correspondence should be Jamie Burke 854 E. Stormy DR Meridian, ID 83646	und Real Estate which future addressed:	nt	•	
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Finance, Insurance, a 4. The name and address to v correspondence should be Jamie Burke 854 E. Stormy DR Meridian, ID 83646 5. Name and address for this	und Real Estate which future addressed:	nt	Name and \$25.00 fee to:	
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Finance, Insurance, a 4. The name and address to vecorrespondence should be Jamie Burke 854 E. Stormy DR Meridian, ID 83646 5. Name and address for this copy is (if other than #4 above): nature: James Or Burke	which future addressed:	staton press	Name and \$25.00 fee to: Secretary of State use only	OF_STATE_
Finance, Insurance, a 4. The name and address to vecorrespondence should be Jamie Burke 854 E. Stormy DR Meridian, ID 83646 5. Name and address for this copy is (if other than #4 above): Inature:	und Real Estate which future addressed: s acknowledgmer	Application formwatch p65 Revised 04/2003	Name and \$25.00 fee to: Secretary of State use only IDAHO SECRETARY Ø1/09/2008 CK: 3241 CT: 158018	OF STATE OS = OS BH: 18935: ASSUM NAME