

CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name 1 10 PH 1

Please type or print legibly.

(see instruction #8 on back of form)

NOTE: See instructions on reverse before filing	ng. SEGRET - OFFE STATE () - OFFE
The assumed business name which the undersig business is: ———————————————————————————————————	ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Jeanifer Gillis 381	e entity or individual(s) doing Complete Address N. North St #104 Boise Id 93793
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture	
 Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future 	Assumed Business Name and \$20.00 fee to: Secretary of State
correspondence should be addressed: JAG Services 3817 N. North St. #104 Brise #10 83703	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: Jennifer Cillis Printed Name: Jennifer Cillis Capacity: Owner	IDAHO SECRETARY OF STATE 12/10/2001 05:00 CK: CASH CT: 154453 BH: 433652 1 @ 28.00 = 20.00 ASSUM MANE # 2