CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53:504; Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is:

	J.I. Vend	ing
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	<u>Name</u>	Complete Address
	JUN NUKAYA 16	75 RAINIER ST Idehofolls, ID.
	Taka NUKAYA 16	75 RAINIER ST Tashofalls, To,
3.	The general type of business transacted und (mark only those that apply)	er the assumed business name is:
/	Retail Trade	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
4.	The name and address to which future correspondence should be addressed:	one number (optional):
	IDAHO FALLS, ID.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

Signature: (Printed Name:

Capacity: Sole Proprietorship

(see instruction #8 on back of form)

Secretary of State use only IDAHO SECRETARY OF STATE

04/26/1999 09:00 CK: 5282 CT: 114179 BH: 210493

1 0 20.00 = 20.00 ASSIN NOME # 2

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