

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.

I SEP 23 AM 8:31

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

1.	The assumed business name which the ur business is:	ndersigned	I use(s) in the transaction of	
	Lake City Accounts			
2.	The true name(s) and <u>business</u> address(e business under the assumed business name Name JMBS, LLC W 106951	me:	ntity or individual(s) doing <u>Complete Address</u> h Breezy Way, Post Falls, ID 83854	
3.	The general type of business transacted of Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	n and Pub		
4.	The name and address to which future correspondence should be addressed: Bonne H. Giese / JMBS, LLC PO Box 96 Coeur d'Alene, ID 83816		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent		
			Secretary of State use only	
Signa	ature: Honne Qust			
	ed Name: Bonne H. Giese			
Capa	acity/Title: Member			
Signature:		.	IDAHO SECRETARY OF STATE 99/23/2011 05:00 CK: 791126 CT: 172099 BH: 1291643 1 8 25.88 = 25.88 ASSUM NAME # 3	
Printed Name:				
Capacity/Title:				

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