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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B Please type or print legibly. NOTE: See instructions on reverse befo	NAME ne undersigned usiness Name.
1. The assumed business name which the un business is: J2 Realfor Assistant S	
2. The true name(s) and business address(es business under the assumed business nan Name Jeannien S. DeWiff	s) of the entity or individual(s) doing ne: Complete Address 7434 W. <u>Nevonward Dr. Boise</u> , IN <u>83714</u>
 3. The general type of business transacted us Retail Trade Transportatio Wholesale Trade Construction X Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Jeannien S. Newith 7434 W Nevonward Drive Boise, Jako 83714 5. Name and address for this acknowledgn copy is (if other than #4 above): 	n and Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
Signature: <u>Signature required</u> Printed Name: <u>PANNIED S. Debuli H</u> Capacity/Title: <u>Swner</u> (see instruction # 8 on back of form)	Secretary of State use only - gg - gg - UARS ECRETARY OF S - UARS ECRETARY OF S - 12/31/2002 09 - CK: 1578 CT: 150818 DH 1 20.08 = 20.98 ASSU