

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.

2004 JAN -7 AM 9: 02

Please type or print legibly. NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The true name(s) and business address(stress) business under the assumed business name Name Jennifer Jill Good	es) of the entity or individual(s) doing ame: Complete Address 6277 S. Fox Haven Rd. Coeur d'Alene ID 83814
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: same as above	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgme copy is (if other than # 4 above):	Phone number (optional): Secretary of State use only
rinted Name: Jennifer Jill Good apacity/Title: owner (see instruction # 8 on back of form)	See only toms and toms of the second of the

1 0 25.00 = 25.00 ASSUM MANE # 2

