



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED/EFFECTIVE**  
01 AUG 27 PM 2:35

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

KJ & Associates

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Joseph Dalrymple  
Kimberly Dalrymple

Complete Address

PO Box 27 McCall - Id. 83638  
PO Box 27 McCall - Id. 83638

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input checked="" type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input type="checkbox"/>	Finance, Insurance, and Real Estate		

4. The name and address to which future correspondence should be addressed:

KJ & Associates  
P O Box 27  
McCall - Id. 83638

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

Signature: Kimberly C. Dalrymple

Printed Name: Kimberly C. Dalrymple

Capacity: owner

(see instruction # 8 on back of form)

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Revised 01/2001

IDaho SECRETARY OF STATE  
08/28/2001 05:00  
CK: 1063 CT: 158613 DH: 416042  
1 0 20.00 = 20.00 ASSUM NAME # 2

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