

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2015 JAN 27 PM 1:41

SECRETARY OF STATE STATE OF IDAHO

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

Printed Name: ______

The Nook	
The true name(s) and <u>business</u> a business under the assumed business under the assumed business. Name	address(es) of the entity or individual(s) doing siness name: <u>Complete Address</u>
MJB LLC	ルスはh St, Melba ID 83641
W141686	
Retail Trade Tra Wholesale Trade Co Services Ag	nsacted under the assumed business name is: nsportation and Public Utilities nstruction riculture Submit Certificate of Assumed Business
Finance, Insurance, and R 4. The name and address to which correspondence should be address to Mary L Nelson	future Secretary of State
507 Dawn Ct Kuna, ID 83634	208 334-2301
5. Name and address for this acknown copy is (if other than # 4 above):	owledgment
••••	Secretary of State use only
gnature: <u>Many X Nels</u>	IDAMO SECRETARY OF STATE
inted Name: Man / Nelson	01/27/2015 05:00