

## **CERTIFICATE OF**



ASSUMED BUSINESS NAME

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

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

Capacity/Title: //W/16/ -//Unuger

(see instruction #8 on back of form)

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<ol> <li>The assumed business name which the undersigned use(s) in the transaction of</li> </ol>	
business is:	V Park
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Laura S. Jackson	complete Address 65 Westmond rd. Sagle, ID, 83860
3. The general type of business transacted und	ler the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Laura J. Jackson  65 Westmand rd.  Sayle J. Fo. 83860  5. Name and address for this acknowledgme copy is (if other than # 4 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  Phone number (optional):  28-265-4949
	Secretary of State use only
Signature: <u>Saus</u> S. Jawas  Printed Name: <u>Laura S. Jackson</u> Capacity/Title: <u>Owner-Manager</u>	IDAHO SECRETARY OF STATE  97/92/2004 95:00  CK: 2429 CT: 158010 BH: 753726  1 0 25.00 = 25.00 ASSUM MANE # 2