

## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO **FILED IN EFFECT** **RECEIVED**

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



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

B J Associates

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

Bruce Jepperson Name

Complete Address  
PO Box 426 Homedale ID 83628

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

Retail Trade       Manufacturing       Transportation and Public Utilities  
 Wholesale Trade       Agriculture       Finance, Insurance, and Real Estate  
 Services       Construction       Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-337-3300

Bruce Jepperson

Po Box 421e

Homedale ID 83628

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

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

Secretary of State use only

**Signature:**

Printed Name: BRUCE - LEADER SPA

Capacity: 2000

(see instruction # 8 on back of form)

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IDaho SECRETARY OF STATE  
08/03/2006 05:00  
CK: 2397 CT: 158010 BH: 968171  
1 @ 25.00 = 25.00 ASSUM NAME # 2