227	
CERTIFICATE O	F S NAME the undersigned Business Name. Sinte of Day Are
ASSUMED BUSINES	SNAME 2003 EFFE
Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed	the undersigned
Please type or print legibly.	Station 9: 2.
NOTE: See instructions on reverse before	ore filing.
1. The assumed business name which the ur	
business is:	
JEJ Flooring Installa	
The true name(s) and <u>business</u> address(es business under the assumed business nan	s) of the entity or individual(s) doing ne:
Name Lab R A	Complete Address
Justin P. Austin	1720 Friitdale he
	CourdiAlene, ID 83815
 Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Tushin, Aushin The mane and address for this acknowledgmen 	and Public Utilities 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
COPY IS (if other than # 4 above):	
Signature: (signature: Printed Name: Sapacity/Title: (see instruction # 8 on back of form)	Secretary of State use only IDAHO SECRETARY OF STATE 11/24/2003 05:00 CK: 1183 CT: 158010 DH: 713165 1 8 25.00 = 25.00 ASSUM NAME # 2
	D 70904