

Printed Name: Hogne

(see instruction # 8 on back of form)

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

(III) 21 AM 8: 5c

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: Jerk Brox. 1 ER 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address DOX 50161 ID 13705 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 BOX 50161 208 334-2301 Boke, (D 83705 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above): Secretary of State use only

IDAHO SECRETARY OF STATE @6/21/2004 @5:00 CK: 527 CT: 180135 BH: 751438 1 0 25.00 = 25.00 ASSUM NAME #

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