

## **CERTIFICATE OF** 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: UN -4 AM 10: 21

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

	UNAU
The assumed business name which the und business is:	dersigned use(s) in the transaction of
SJC Cor	MPANY
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
<u>Name</u>	Complete Address
CHRIS NORTON	HC 03 BOX 94N ST. MARIES, ID 83861
3. The general type of business transacted under the assumed business name is:	
Wholesale Trade 🔲 Construction	and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  SJC COMPANY HC 03 Box 94N ST. MARIES JD. 83861	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above):</li> </ol>	t Phone number (optional): (208) 245-1117
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature: Chil Moston	06/04/2001 09:00 CK: 1555 CT: 147166 BH: 498748
Printed Name: CHRIS NORTON	Revised 01/200 = 16 50.00 = 20.68 ASSUM HAME # 2
Capacity: $OWNER$	Wexised 1 6 20.00 = 20.00 ASSUM HAME # 2
(see instruction # 8 on back of form)	) ö