



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2012 MAR -5 PM 4:06

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

Please type or print legibly.
Instructions are included on back of application.

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

JONES FIRE STARTERS

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

Name

JANARD LEROY JONES

Complete Address

1288 NORTHERN PINE DR

TWIN FALLS IDAHO 83301

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

 Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

 Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

JONES FIRE STARTERS

1288 NORTHERN PINE DR

TWIN FALLS IDAHO 83301

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

Secretary of State use only

 Signature: Janard Jones

 Printed Name: JANARD LEROY JONES

 Capacity/Title: OWNER

Signature: _____

Printed Name: _____

Capacity/Title: _____

 IDAHO SECRETARY OF STATE
 03/05/2012 05:00
 CK: 923389 CT: 172099 BH: 1313640
 1 @ 25.00 = 25.00 ASSUM NAME # 2