

FILED/EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

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

AUG 8 2 04 PM '00
SECRETARY OF STATE
IDAHO

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

CALAMITY JAINES

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

Name	Address
CALAMITY JAINES	
JAMES E BARNETT	201 MAIN ST IDAHO CITY ID

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

CAFE - SERVICE

See categories on the reverse

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

JAMES BARNETT PO Box 266 IDAHO CITY 83403

Signed JAMES E BARNETT
By JAMES BARNETT

Capacity _____

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Revision 10936

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Secretary of State use only
IDAHO SECRETARY OF STATE

08/09/2000 09:00
CK: CASH CT: 134518 BH: 339819

1 @ 20.00 = 20.00 ASSUM NAME # 2

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