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CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 DEC 18 PM 1:40

SECRETARY OF STATE STATE OF IDAHO

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

FILED EFFECTIVE

Jeff Miller Property Management 2. The true name(s) and <u>business</u> address business under the assumed business	ss(es) of the entity or individual(s) doing s name:
<u>Name</u> Jeffrey W. Miller	Complete Address
	1033 N. Eagle Rd
	Kuna, ID 83634
3. The general type of business transacted Retail Trade Transports Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Est 4. The name and address to which future correspondence should be addressed: Jeffrey W. Miller 1033 N. Eagle Rd. Kuna, ID 83634 5. Name and address for this acknowledge copy is (if other than # 4 above):	ation and Public Utilities tion Te 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
Signature: May W Miller Printed Name: Jeffrey W. Miller	Secretary of State use only
Capacity/Title: Owner	_
Signature:	
Printed Name:	IDAHO SECRETARY OF STATE 12/18/2012 05:00
Capacity/Title:	ICZIOZCNIC NOSNA

9/21/2012

atr.pmd Rev. 07/2010

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