



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2017 JUN 22 AM 8:47

SECRETARY OF STATE
STATE OF IDAHO

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

Eden Repair

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Frank JANSSON 100 Grand view dr TF 83301
(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

☐ Retail Trade

☐ Construction

☒ Transportation and Public Utilities

☐ Wholesale Trade

☒ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Frank JANSSON
(Name)

100 Grand view dr
(Address)

Twin Falls Id 83301
(City) (State) (Zipcode)

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

Farmer's Point
(Name)

1097 Blue Lakes P.O. Box 5029
(Address)

Twin Falls Id 83301
(City) (State) (Zipcode)

Printed Name: Frank JANSSON

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/22/2017 05:00

CK: NO CK# CT: 341573 BH: 1590199

10 25.00 = 25.00 ASSUM NAME #2

D/95313