FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2007 JUL -3 PM 1:55

STATE OF IDAHO

Snake River I	rest Products		
The true name(s) and business address(es business under the assumed business nam Name Jason Jacobson	: Complete /	entity or individual(s) doing Complete Address 22 Oaktrail Dr, Rexburg, Id 83440	
The general type of business transacted un	er the assumed busi and Public Utilities	ness name is:	
 ✓ Wholesale Trade ☐ Construction ☐ Services ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Co	ertificate of Business d \$25,00 fee to:	
The name and address to which future correspondence should be addressed: Jason Jacobson 322 Oaktrail Dr, Rexburg, Id 83440	Basemen PO Box 8	Jefferson t West	
5. Name and address for this acknowledgme copy is (if other than #4 above):	Di	2301 SY 2080 nber (optional):	
	Søcr	stary of State use only	
ature: (strature required) ged Name: Jason Jacobson	odolices adolices	•	
acity/Title: Owner (see instruction # 8 on back of form)	Autoplant C	IDAHO SECRETARY OF STATE 07/03/2007 05 = 0 K: 1201968 CT: 172039 BH: 18 8 25.00 = 25.00 ASSUM NAM	

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