

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.

2003 APR 14 PM 2:27

STATE OF IDAHO

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

J + T Entertainment

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

Name
Ralph Rodriguez

Complete Address

447 Harrison T.F. ID

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

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

Ralph Rodriguez
447 Harrison
Twin Falls ID. 83

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

Phone number (optional):

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

**Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301**

Signature: [Signature]
Printed Name: Rafael Rodriguez
Capacity: _____

(see instruction # 8 on back of form)

Secretary of State use only

DL4618

IDAHO SECRETARY OF STATE
04/22/2003 05:00
CK: 5778 CT: 150010 BH: 676195
1 @ 25.00 = 25.00 ASSUM NAME # 2