

Signature:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 DEC 19 AM 10: 36

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Jamms Frozen Yogurt						
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):						
	Jamms Properties LLC	710 W Elmgrove Ct Coeur d Alene ID 83815					
	(Name) W71141	(Address)		*****			
	(Name)	(Address)		• 11			
	(Name)	(Address)					
	(Name)	(Address)					
_		t	•		: - -		
3.	The general type of busines		ne as				
	Retail Trade	Construction			portation and Public U	Jtilities	
	Wholesale Trade	Agriculture	~	∐ Minir	•	al Fatata	
	Services	Manufacturing	y	∐ Finan	ice, Insurance, and Re	eai Estate	
4.	Mailing address for future c	orrespondence:	5.	Name and a	ddress for this acknov	vledgment	
	Lora Seaman						
	(Name)	0.77.407		(Name)			
	3500 N Government Way (Address)	Suite 107		(Address)			
	Coeur d Alene IE	O 83815		(··· ,			
	(City) (S	State) (Zipcode)		(City)	(State)	(Zipcode)	
Printed Name: Loka Slaman				Secretary of State use only			
Siç	gnature: <u>Lora Slam</u>	an					
Printed Name:				1DAHO SECRETARY OF STATE 12/19/2016 05:00			
Signature:				CK:1749 CT:332424 BH:1560023 16 25.00 = 25.00 ASSUM NAME #2			
Pr	inted Name:						