

## CERTIFICATE OF ASSUMED BUSINESS NAME

## **FILED EFFECTIVE**

Pursuant to Section 53-504, Idaho Code, the undersigned 2012 NOV 30 AM 9:01 submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is:	rsigned use(s) in the transaction of
GARY CHAD JONES	2 50NS
2. The true name(s) and <u>business</u> address(es) or business under the assumed business name:  Name  GARY CHAD JONES  BONNIE J TONES	Complete Address  ZUY W. 200 S PURIEY TO 63346
3. The general type of business transacted unde	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  (a CHA) JONES	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
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Holled Finer	Secretary of State use only
Printed Name: GCHAD JONES  Capacity/Title: GLUNEE  Signature: DMUL YOULD  Printed Name: BOWNE J JONES	IDAHO SECRETARY OF STATE 11/30/2012 05:00 CK: 4543 CT: 158010 BH: 1349453 1 8 25.00 = 25.00 ASSUM NAME # 2

D159500

Capacity/Title:\_