



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

JOFAI INTERNATIONAL

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

Name

Complete Address

MARILYN FAIVRE

102 E. 1ST AVE UNIT A-5

POST FALLS, ID 83854

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

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

Phone number (optional): 208 777-3198

JOFAI INTERNATIONAL

102 E. 1ST AVE UNIT A-5

POST FALLS, ID 83854

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

01/04/2000 09:00
CK: 1030 CT: 124778 BH: 278476

1 @ 20.00 = 20.00 ASSUM NAME # 2

D31867

Signature: Marilyn Faivre

Printed Name: MARILYN FAIVRE

Capacity: owner

(see instruction # 8 on back of form)

Revision 12/99

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