



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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.

2006 JUN 14 PM 2:00
SECRETARY OF STATE
STATE OF IDAHO

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

Jackson's Design Studio

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

Name

Travis Jackson

Amie Jackson

Complete Address

16 6th St. N.

Wampa Id.

83687

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:

Jackson's

16 6th St. N.

Wampa Id. 83687

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

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

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

Phone number (optional):

Signature:

(signature required)

Printed Name: Travis Jackson

Capacity/Title: Owner

(see instruction # 8 on back of form)