

## CERTIFICATE OF ASSUMED BUSINESS NAME

2013 FEB 21 AM 8: 59

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. Instructions are included on back of application.

SECHALL OF STATE

business		ındersigned	d use(s) in the transaction of	
Nick Jens	en			
business	name(s) and <u>business</u> address(s) under the assumed business na <u>Name</u> O. Jensen	ame:	ntity or individual(s) doing <u>Complete Address</u> cany dr. Idaho falls ID. 83404	
Tionage	O, torisar		sarry dr. Idario falls ID. 30-70-7	
Re	eral type of business transacted to tail Trade Transportation Transportation	on and Pub		
☐ Ma	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed: Nick Jensen		Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:	
correspo			Secretary of State 450 North 4th Street PO Box 83720	
3656 Tuso	cany dr. Idaho Falls, ID. 83404		Boise ID 83720-0080 208 334-2301	
copy is (i		ent		
3656 Tuse	cany dr. Idaho Falls, ID. 83404		Secretary of State use only	
Signature:	hope			
Printed Name:	Nick Jensen			
Capacity/Title:		_		
Signature:		_	IDAHO SECRETARY OF STATE	
rinted Name:		_	02/21/2013 05:00 CX: 122561 CT: 279664 BH: 1361127	
Capacity/Title:	Capacity/Title:		1 0 25.00 = 25.00 ASSUM NAME #	

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