



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED EFFECTIVE**

**2015 MAY -6 PM 4:45**

**SECRETARY OF STATE  
STATE OF IDAHO**

Please type or print legibly.

Instructions are included on back of application.

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

SATORI CONSTRUCTION

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

Name

(W127968)

Complete Address

JONES LUXURY HOMES LLC 415 W River Trail Ct Eagle ID 83614  
Ka Man Schoettger 1120 W Solana Dr. Boise ID 83709

3. The general type of business transacted under the assumed business name is:

- |  |  |
|--|--|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input checked="" type="checkbox"/> Construction             |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

372 S. EAGLE RD STE 310  
EAGLE ID., 83614

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

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

Signature: Keith Jones

Printed Name: KEITH A. JONES

Capacity/Title: MANAGER

Signature: Joey Schoettger

Printed Name: Joey Schoettger

Capacity/Title: OWNER

Secretary of State use only

IDAHO SECRETARY OF STATE

**05/06/2015 05:00**

CK:2816918 CT:172099 BH:1474370  
1@ 25.00 = 25.00 ASSUM NAME #2

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