

CERTIFICATE OF ASSUMED BUSINESS NAME

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.



STATE OF 10AHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: 54. Jac Valley Process Service and Figitive Recovery.	
2. The true name(s) and <u>business</u> address(es) o business under the assumed business name: Name MICHAEL STOCKS	f the entity or individual(s) doing Complete Address D. O. Box 151 St. Marries Tacho 83861
	er the assumed business name is: 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:	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
Same	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): 208-659-8167
	Secretary of State use only
Signature: Sole Profriedor (see instruction #8 on back of form)	IDAHO SECRETARY OF STATE 29/24/2001 05:00 CK: 1389 CT: 151631 2H: 42971

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