



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.

FILED EFFECTIVE

2005 MAR 24 PM 1:06

SECRETARY OF STATE
STATE OF IDAHO

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

JJ Dental Staffing

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

Name	Complete Address
<u>Jamie Wheeler Brackenbury</u>	<u>17344 N. Chouteau Ave. Nampa 83667</u>
_____	_____
_____	_____

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 type="checkbox"/> Construction |
| <input checked="" 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:

Jamie Brackenbury
17344 N. Chouteau Ave.
Nampa ID 83667

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

Signature:
(signature required)

Printed Name: Jamie Brackenbury

Capacity/Title: Owner / President

(see instruction # 8 on back of form)

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

Phone number (optional):

208-794-8577

Secretary of State use only

5/10/2005 10:00 AM
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IDAHO SECRETARY OF STATE
03/24/2005 05:00
CK: 500001 CT: 172099 BH: 800593
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 86000