



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.

2007 JUN -8 AM 9:24

SECRETARY OF STATE
STATE OF IDAHO

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

J&J ETC

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

Name

JIM SHANKLAND

Jeri SHANKLAND

Complete Address

6439- SUMMER HILL DR. BOISE 83714

" " " " "

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input 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:

AS ABOVE

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):

208-853-5132

Secretary of State use only

Signature: J. Shankland
(signature required)

Printed Name: JIM SHANKLAND

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Form 53-504
Revised 04/2003

IDAHO SECRETARY OF STATE
01/08/2007 05:00
CK: 1069 CT: 158810 BH: 1024495
1 # 25.00 = 25.00 ASSUM NAME # 2

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