

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assumed Business Name

99 FEB 17 PM 3: 58

SECRETARY OF STATE

STATE OF IDAHO

1. The assumed business name which the undersigned uses in the transaction of business is:

JONES WHOLESALE PRODUCTS CO.

Jones Wholesale Products Co.

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

MATT D. JONES Name

Complete Address

1770 WEST STATE ST. #316

Boise ID 83702

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)



Retail Trade



Manufacturing



Transportation and Public Utilities



Wholesale Trade



Agriculture



Finance, Insurance, and Real Estate



Services



Construction



Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 895-7038

JONES WHOLESALE PRODUCTS CO.

1770 WEST STATE ST. #316

BOISE, IDAHO 83702

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

Signature: MATT JONES

Printed Name: MATT JONES

Capacity: _____

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

02/17/1999 09:00
CK: none CT: 111231 BH: 188791

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 23215

Revision 2/97

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