



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.

2005 OCT 07 AM 8:56

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

JESS PRODUCTIONS

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

MICHAEL D. DALESSI

482 8th St., Idaho Falls, ID 83401

ELIZABETH DALESSI

482 8th St., Idaho Falls, ID 83401

JESSICA BRIE DALESSI

482 8th St., Idaho Falls, ID 83401

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:

Michael D. Dalessi

482 8th Street

Idaho Falls, ID 83401

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):

Bank of Idaho ATTN: Val

399 N. Capital

Idaho Falls, ID 83402

Phone number (optional):

Secretary of State use only

Signature: Michael D. Dalessi
(signature required)

Printed Name: Michael D. Dalessi

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:corpformstat.krmstat.p65
Revised 04/2003

IDaho SECRETARY OF STATE
10/07/2005 05:00
CK: 17992 CT: 158018 BH: 915087
1 @ 25.00 = 25.00 ASSUM NAME # 2

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