

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

## Please type or print legibly. Instructions are included on back of application.

KUMON MATH AND READ	DING CENTER OF MERIDIAN FAIRVIEW
2. The true name(s) and <u>business</u> address business under the assumed business Name  JLO LLC  W95114	ss(es) of the entity or individual(s) doing s name: <u>Complete Address</u> 13433 W ENGELMANN DR, BOISE, ID 83713
3. The general type of business transacted Transport  Retail Trade Transport  Wholesale Trade Construct  Services Agricultu	tation and Public Utilities etion
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
<ol> <li>The name and address to which future correspondence should be addressed: JLO LLC</li> </ol>	450 North 4th Street PO Box 83720
13433 W ENGELMANN DR BOISE, ID 83713	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	jment
mature: Marain	Secretary of State use only
nted Name: JERI OLEARAIN	
pacity/Title: MANAGING MEMBER	
nature:	IDAHO SECRETARY OF STATE 07/27/2010 05:0
nted Name:	CK: 4078 CT: 189764 BH: 12322

ebrupmd Rev. 07/2010

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