



# 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. 2004 JUL 20 AM 8:29

**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:

Jaillett & Anglin Appraisal Services

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

| <u>Name</u>                           | <u>Complete Address</u>                         |
|---------------------------------------|---|
| <u>✓ Kevin &amp; Heather Jaillett</u> | <u>11800 Sweet-Ola Highway, Sweet, ID</u>       |
| <u>Michael &amp; Renea Anglin</u>     | <u>1189 E. Stormy Drive, Meridian, ID 83610</u> |
|                                       | <u>ID 83642</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 checked="" type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

4. The name and address to which future correspondence should be addressed:

Jaillett & Anglin Appraisal Services  
11800 Sweet-Ola Highway  
Sweet, ID 83610

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

Phone number (optional):

208-584-3324

Secretary of State use only

Signature: Heather Jaillett  
(signature required)  
Printed Name: Heather Jaillett  
Capacity/Title: Administrative Officer

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE  
07/20/2004 05:00  
CK: 1007 CT: 150010 BH: 756450  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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