

Capacity/Title: Owner

Signature: _____ Printed Name:

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 JAN -7 AM 8: 37

SECRETARY OF STATE STATE OF IDAHO

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

	J M Enterprises
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> S. Joe Wilson	ess(es) of the entity or individual(s) doing s name: <u>Complete Address</u> 167 Wagon Bridge Lane Sagle, Idaho 83860
The general type of business transactors Retail Trade Transport Wholesale Trade Construct	ed under the assumed business name is: tation and Public Utilities
correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street
Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed: S. Joe Wilson	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720
Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street
Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed: S. Joe Wilson 167 Wagon Bridge Lane Sagle, Idaho 83860 Name and address for this acknowledg copy is (if other than #4 above): S. Joe Wilson	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed: S. Joe Wilson 167 Wagon Bridge Lane Sagle, Idaho 83860 Name and address for this acknowledg copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301

abri.pmd Rev. 07/2010

IDANO SECRETARY OF STATE

1/07/2011 05:00

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