

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.

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

FILED EFFECTIVE

SECRE BY OF STATE STATE OF IDAHO

	Jam-Z	
The true name(s) and <u>business</u> business under the assumed be		entity or individual(s) doing
<u>Name</u>		Complete Address
Arwa Jundi Moulton	578 E. 6	500 N., Firth, ID 83236
	· 	

. The general type of business tr	ansacted under the	assumed business name is:
	ansportation and Pu	
	onstruction	
=	griculture	
	ining	Submit Certificate of
Finance, Insurance, and	•	Assumed Business
— Finance, insulance, and	VEGI ESIGIE	Name and \$25.00 fee to:
. The name and address to whic	h future	Secretary of State
correspondence should be add	ressed:	450 North 4th Street
Jam-Z		PO Box 83720
578 E. 600 N.		Boise ID 83720-0080 208 334-2301
Firth, ID 83236		200 334-2301
Name and address for this ack	nowledgment	
COPy is (if other than # 4 above):	-	
Arwa Jundi Moulton		
578 E. 600 N.		
Firth, ID 83236		Secretary of State use only
nature: Smlum		
ited Name: Arwa Jundi Moulton		
pacity/Title: Owner		
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nature:	_	97/21/2010 05 = CK: 138319 CT: 158618 BH: 1
ted Name:		1 8 25.00 = 25.00 ASSUM N

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