

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 OCT 27 AM 8: 32

Please type or print legibly.
NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The true name(s) and business address(business under the assumed business na Name	
Scott A. Jinkens	Complete Address
- J. Jimels	2022 N. 13th #B
	Coeurd' Alene ID
The general type of business transacted to the second	83814
Wholesale Trade Construction Services Agriculture	on and Public Utilities Submit Certificate of
Manufacturing Mining Finance, Insurance, and Real Estate	Assumed Business
4. The name and address to which future correspondence should be addressed: 2022 N. /3th #B	Secretary of State 700 West Jefferson Basement West PO Box 83720
Coeve d' Alene, ID 83814	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above): Same as #4	ent Phone number (optional): 208 - 640 - 1333
	Secretary of State use only
inted Name: Switch A. Jinkens pacity/Title: Owner	1DAHO SECRETARY OF STATE
pacity/Title: <u>OWDER</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE