



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 -5 PM 3:01

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Jon D. Hill, Attorney at Law

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

Name	Complete Address
Law Office of Jon D. Hill, P.C.	1159 E Iron Eagle Dr, Suite 170B; Eagle, ID 83616
Jon D. Hill	1159 E Iron Eagle Dr, Suite 170B; Eagle, ID 83616

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Jon D. Hill
1159 E. Iron Eagle Drive, Suite 170-B
Eagle, ID 83616

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

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

Signature: Jon D. Hill

Printed Name: Jon D. Hill

Capacity/Title: President

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/05/2011 05:00
CK: 257 CT: 254064 BH: 1253942
1 @ 25.00 = 25.00 ASSUM NAME # 3

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