CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 MAR 11 AM 9: 13 SEUNE MAN

Please type or print legibly. NOTE: See instructions on reverse before filing	STATE OF IDAHO
The assumed business name which the undersigned use(s) in the transaction of business is:	
J L J Company	1
The true name(s) and business address(es) of the business under the assumed business name: Name Janard L Jones	e entity or individual(s) doing Complete Address 3608 Mount Olympus Way Twin Falls, ID 83301
The general type of business transacted under the	
Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: 3608 Mount Olympus Way Twin Falls, ID 83301	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
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (optional): 208-280-0794
	Secretary of State use only
nature: (signature required) Janard L Jones pacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 03/11/2005 05:0 CK: NO CK # CT: 158010 BH: 798 1 P 25.00 = 25.00 ASSUM NAME

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