

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.

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

Juxtaprecision	
The true name(s) and business address(es business under the assumed business name Name Aaron Metcalf	c) of the entity or individual(s) doing ne: Complete Address P.O. Box 404 Gooding, ID 83330
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Aaron Metcalf	Secretary of State 700 West Jefferson Basement West PO Box 83720
P.O. Box 404 Gooding, ID 83330	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	nt Phone number (optional):
	Secretary of State use only
gnature:	See
apacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE

92/20/2007 05:00

CK: 10367714338 CT: 158010 BH: 1034206
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