

Capacity/Title: member

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

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The assumed business name which the under business is:	
The true name(s) and <u>business</u> address(es) of business under the assumed business name: <u>Name</u>	f the entity or individual(s) doing <u>Complete Address</u>
Jarron Entertaining UC (W106970)	542 & Center Street Pocatello 10 83201
3. The general type of business transacted unde X Retail Trade Transportation are Wholesale Trade Construction Services Agriculture Manufacturing Mining	nd Public Utilities Submit Certificate of
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Jaxon Enter taining IIC 542 E Contex Street	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
Pocatello 10 8320] 5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
Printed Name: Brian Pavance Capacity/Title: member	
Signature: <u>Kadio Cavanes</u> Printed Name: <u>Kadee Cavanee</u>	IDANO SECRETARY OF STATE 12/15/2011 95:00 CK: 1984 CT: 262738 BM: 1381834

abn.pmd Rev. 07/2010