

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

FILED/EFFECTIVE

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

JONES BILLING SERVICE

00 DEC 13 AM 10:04

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

Name
DYNE JONES

Complete Address

PO BOX 912, 309 E. C ST, Shoshone, ID 83352

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☒

Services

☐

Construction

☐

Mining

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

DYNE JONES

PO BOX 912

Shoshone, ID 83352

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature:

Dyne Jones

Printed Name:

DYNE JONES

Capacity:

PRESIDENT

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

12/13/2000 09:00

CK: 86421479646 CT: 139583 BH: 366394

1 @ 20.00 = 20.00 ASSUM NAME # 2

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