

FILED



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FEB 17 PM 12:12

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

VERDI-JAMES FINANCIAL SERVICES

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 |
|--------------------|-------------------------------|
| <u>CRAIG VERDI</u> | <u>480 S. Front St SU 101</u> |
| <u></u> | <u>Boise, Id 83702</u> |
| <u></u> | <u></u> |

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

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

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

VERDI-JAMES
480 S. Front St. SU 101
Boise, Id 83702

Phone number (optional):

~~XXXXXXXXXX~~

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

Signature: Craig Verdi
(signature required)

Printed Name: CRAIG VERDI

Capacity/Title: owner
(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/02/03

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IDAHO SECRETARY OF STATE
02/18/2004 05:00
CK: 3123 CT: 158010 BH: 727875
1 @ 25.00 = 25.00 ASSUM NAME # 2