

## 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.

NOTE: See instructions on reverse before filing.

08 AUG 11 AM 9: 31

SECRETARY OF STATE STATE OF IDAHO

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	
Jessica Allen	
Jessica Alien	Pinehurst, ID 83850
3. The general type of business transacted under t	
Retail Trade Transportation and Wholesale Trade Construction	Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:      Jeremy Allen	Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080
1005 S Division	(208) 334-2301
Pinehurst, ID 83850	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
gnature:	
nted Name:	
pacity/Title: Owner	IDAHO SECRETARY OF STA 98/11/2008 95
(see instruction # 8 on back of form)	CK: 133146 CT: 158019 BH: 1 P 25.60 = 25.80 ASSUM