FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 DEC -2 PM 2: 57

SECRETATION STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

3D Router Designs	
The true name(s) and business address	
business under the assumed business r	
<u>Name</u>	Complete Address
Daniel Q Henderson	1113 10th ST Lewiston, ID 83501
The general type of business transacted	lunder the assumed husiness name is:
	tion and Public Utilities
	Submit Certificate of
	Assumed Business
 Finance, Insurance, and Real Esta 	ate Name and \$25.00 fee to:
The name and address to which future	Socretary of State
· · · · · · · · · · · · · · · · · · ·	Secretary of State 450 North 4th Street
correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720
correspondence should be addressed: Daniel Q Henderson	450 North 4th Street PO Box 83720 Boise ID 83720-0080
Daniel Q Henderson 1113 10th ST	450 North 4th Street PO Box 83720
correspondence should be addressed: Daniel Q Henderson 1113 10th ST Lewiston, ID 83501	450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
correspondence should be addressed: Daniel Q Henderson 1113 10th ST Lewiston, ID 83501 Name and address for this acknowledge	450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
correspondence should be addressed: Daniel Q Henderson 1113 10th ST Lewiston, ID 83501	450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
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12/02/2014 05:00

CK: 2398396 CT: 172099 BH: 1451385 16 25.00 = 25.00 ASSUM NAME #2

D175272

9/21/2012 Abri, pmd Rov.

Signature:

Printed Name: _____

Capacity/Title: Owner

Capacity/Title:_