

227



**CERTIFICATE OF  
ASSUMED BUSINESS NAME**

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

04 DEC 23 PM 1:16

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:

J Crist Gallery

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**

J Crist Inc

223 S. 17th St. Boise 83702

C120450

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

- ☒ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate
- Submit  
 Assume  
 Name a

**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:

J Crist Gallery

223 S. 17th Street

Boise Id. 83702

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

Phone number (optional):

J Crist Gallery

223 S. 17th Street

Borse Id. 83702

**Signature:**

      
Jacqueline Crist  
(signature required)

(Signature required)

Printed Name: Jacqueline Crist

Capacity/Title: President

(see instruction # 8 on back of form)

**Secretary of State use only**

Revised 04/2003  
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IDAHO SECRETARY OF STATE

12/23/2004 05:00  
CK: 1940 CT: 158010 BH: 783394

1 @ 25.00 = 25.00 ASSUM NAME # 2