CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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 und business is:	dersigned use(s) in the transaction of
2. The true name(s) and business address(es business under the assumed business name Name CHRIST OPHER D. W. II.E.	of the entity or individual(s) doing ne: Complete Address 2409 S. FAIRWAY COLTD 83201
3. The general type of business transacted ur Retail Trade Transportation Wholesale Trade Construction	nder the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: CHRISTOPHER & WILLIE 2707 S. FULLWAY	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent
	Secretary of State use only
Signature: CHRISTOPHER W. NIE Capacity/Title: OWNER	IDAHO SECRETARY OF STATE 10/01/2007 05:00 CX: 1803 CT: 153810 BH: 187885 1 8 25.88 = 25.80 ASSUM MAME # 2
(see instruction # 8 on back of form)	D115581