



# 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.

## FILED/EFFECTIVE

02 MAY -3 PM 3: 52

SECRETARY OF STATE  
STATE OF IDAHO

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

PURE PERFORMANCE

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

KIRK R. WHITE

9823 W. MOSSY CUP ST. Boise, ID 83709

TRAVIS CHAPIN

1116 S. GARDEN PL. Boise, ID 83705

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 checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input type="checkbox"/> Manufacturing                       | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> Finance, Insurance, and Real Estate |  |

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

KIRK R. WHITE  
9823 W. MOSSY CUP ST.  
BOISE, ID 83709

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Phone number (optional):

(208) 378-4479  
353-5615

Secretary of State use only

Signature: [Signature]

Printed Name: KIRK WHITE

Capacity/Title: PARTNER

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE  
05/03/2002 05:00  
CK: CASH CT: 158010 BH: 463493  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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