



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2002 OCT -2 AM 9:03

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:

Valley Visual Productions

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

Christijan Draper

1318 Fremont Dr., Twin Falls, Idaho, 83301

Jacob Draper

1318 Fremont Dr., Twin Falls, Idaho, 83301

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 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

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

Christijan Draper, Valley Visual Productions
1318 Fremont Dr., Twin Falls, ID 83301

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

N/A

Phone number (optional):

(208) 735-4093

Secretary of State use only

Signature: _____

(signature required)

Printed Name: Christijan Draper

Capacity/Title: Partner

(see instruction # 8 on back of form)

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Revised 09/2002

IDAHO SECRETARY OF STATE
10/02/2002 05:00
CK: 790 CT: 158010 BH: 524603
1 @ 20.00 = 20.00 ASSUM NAME # 2

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