

Capacity/Title: DWNER

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME - 3

FILED EFFECTIVE

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

The true name(s) and business address(es business under the assumed business name.	) of the entity or individual(s) doing ae:
CHRISTOPHER WHITE	Complete Address 1000 HELMER LANE DEAKY TD 83823
Wholesale Trade Construction Services Agriculture Manufacturing Mining	der the assumed business name is:  and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  CHRISTOPHER WHITE 1000 HELMER LAME DERRY ID 635623	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):
DEARY ID 83822	Secretary of State use only  Sydroughouse  S

CK: 92560195181 CT: 158810 BH: 784684 1 0 25.00 = 25.00 ASSUM MANE # 2

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