

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.



FILED/EFFECTIVE

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

Christensen Welding

01 JAN 25 AM 10:40

STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Elden W Christensen Name

2 EAST 620th SHOSHONE Id 83352 Complete Address

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing           | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input checked="" type="checkbox"/> Agriculture  | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input checked="" type="checkbox"/> Construction | <input type="checkbox"/> Mining                              |

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

ELDEN W CHRISTENSEN  
#2 EAST 620th  
SHOSHONE, Id 83352

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Secretary of State use only

Signature: Elden W Christensen

Printed Name: ELDEN W CHRISTENSEN

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 2/97  
Information pm6

IDAHO SECRETARY OF STATE

01/25/2001 09:00  
CK: 1535 CT: 141355 BH: 374898

1 @ 20.00 = 20.00 ASSUM NAME # 2

D-42116