227	
CERTIFICATE O	F
ASSUMED BUSINESS NAMEED EFFECTIVE	
ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 07 APR 16	
Please type or print legibly	
NOTE: See instructions on reverse bet	fore filing. SECRETARY OF STAT
NOTE: See instructions on reverse before filing. SECRETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
business is:	
RAW ART GALLERY	
2. The true name(s) and <u>business</u> address(e	es) of the entity or individual(e) doing
business under the assumed business na	me:
Name	Complete Address
Robert A. White	P.D. Box 50493 Roice IN 83705
Cynthia A. White	P.O. Box 50493 Roice ID 83705 P.D. Box 50493 Boise ID 83705
3. The general type of business transacted under the assumed business name is:	
Wholesale Trade Construction	n and Public Utilities
Services Agriculture	
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future	
correspondence should be addressed:	Secretary of State 700 West Jefferson
<b>^</b>	Basement West
RAW ART GALLERY	PO Box 83720
Baise ID 83705	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme	ent Phone number (optional):
COPY IS (if other than # 4 above):	
	Secretary of State use only
	9
Signature: Rubot A White	nevetin pt
Printed Name: Robert A, White	IDAHO SECRETARY OF STATE   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   014/16/2007 05 ± 00   015/2007 05 ± 00   016/2007 05 ± 00   017/2007 05 ± 00   018/2007 05 ± 00   018/2007 05 ± 00   018/2007 05 ± 00   018/2007 05 ± 00   018/2007 05 ± 00   018/2007 05 ± 00
Capacity/Title: Owner	CK: 1568 CT: 156018 BH: 1847518 1 # 25.08 = 25.08 ASSUM NOME # P
(see instruction # 8 on back of form)	3
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