



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

**FILED**

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

08 SEP 29 AM 8:19

SECRETARY OF STATE  
STATE OF IDAHO

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

THE VIDEO DOCTOR

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

ROBERT R. WAGNER

Complete Address

4272 N. PENNFIELD PL. BOISE, ID 83713

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

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

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

Phone number (optional): (208) 377-4721

ROBERT WAGNER

4272 N. PENNFIELD PL.

BOISE, ID 83713

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

Signature:

Robert R. Wagner

Printed Name: ROBERT R. WAGNER

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 1/98

9/29/1998 09:00

Secretary of State use only  
IDAHO SECRETARY OF STATE

09/29/1998 09:00  
CK: 4628 CT: 104629 DN: 149182

1 @ 20.00 = 20.00 ASSUM NAME # 2

# D18636