



# CERTIFICATE OF ASSUMED BUSINESS NAME

**FILED EFFECTIVE**

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

**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:

WHITE CLOUD

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

Rein Konpo Kaales

524 S 6th Avenue, Pocatello, ID 83201

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

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

White Cloud

524 S 6th Ave

Pocatello, ID 83201

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

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):

208-478-9715

Signature: \_\_\_\_\_

*(Signature required)*

Printed Name: \_\_\_\_\_

Rein Konpo Kaales

Capacity/Title: \_\_\_\_\_

President

(see instruction # 8 on back of form)

Secretary of State use only

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Rev. 04/2002

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01/25/2005 05:00  
CK: 1114 CT: 158010 DH: 789891  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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