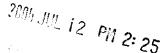


## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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.



SOM JUL 12 PM 2: 25

C D & L Ente	erprises
. The true name(s) and business address(es) of business under the assumed business name:	
Name	Complete Address 302 N. 300 W.
Christopher D. Wilmes	
	Blackfoot, ID 83221
. The general type of business transacted unde	r the assumed business name is:
Retail Trade Transportation ar	nd 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:  C D & L Enterprises  302 N. 300 W.  Blackfoot, ID 83221  5. Name and address for this acknowledgment copy is (if other than # 4 above):	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  Phone number (optional): (208) 785-1815
nature: <u>Mistaska S. Miskas</u> nted Name: <u>Mristopher D. Wilmes</u> pacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	Secretary of State use only    Colored Desired   Colored Desired