

## 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.

Printed Name: Christopher C Brooks

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

Duner

(see instruction #8 on back of form)

02 MAY 21 PM 12: 00

STATE OF IDAHO

Tuesday's Child  Tuesday's Child	
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  Christopher C. Brooks  Danielle M. Brooks	Complete Address  Baker 150 N. 2 East
3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Tuesday's Child	
5. Name and address for this acknowledgment copy is (if other than # 4 above):  Chris Brooks  I G Raker Drive  M+ Home ID 9347  ignature:  The state of the state	Phone number (optional):  208 587 7070  Secretary of State use only

IDAHO SECRETARY OF STATE 05/21/2002 05:00 CK: CASH CT: 158010 BH: 467122 1 @ 20.00 = 20.00 ASSUM NAME # 2

D55/37