## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

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SECRETARY OF STATE STATE OF 10 140

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the unbusiness is:	
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Christophen Frey	s) of the entity or individual(s) doing ne: <u>Complete Address</u> 1601 W IITA ST. Boise Id 83702
3. The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	nder the assumed business name is: a and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Christophen Facy  1601 N 11+2 5t  Boise Id 83702	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgme copy is (if other than # 4 above):</li></ol>	Phone number (optional):  208-424-7792
Signature:	Secretary of State use only    Secretary of State use only