



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.

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

WAA Productions

08 JUL 16 AM 26
SECRETARY OF STATE
STATE OF IDAHO

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

Name

Wesley A. Andrews

Complete Address

3119 6th St., Lewiston, ID 83501

3. The general type of business transacted under the assumed business name is:

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

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Wesley A. Andrews

3119 6th St., Lewiston, ID 83501

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Secretary of State use only

Signature: Wesley A. Andrews (signature required)

Printed Name: Wesley A. Andrews

Capacity/Title: Manager

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
07/16/2008 05:00
CK: 507 CT: 158010 BH: 1127192
1 @ 25.00 = 25.00 ASSUM NAME # 2

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