



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

MAY 28 AM 9:49

SECRETARY OF STATE  
STATE OF IDAHO

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

Conal Video Productions

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

Name

Complete Address

Connie Walter

1440 Fairmont Dr.

Idaho Falls, ID 83404

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Phone number (optional): 208-520-9734

Conal Video Productions

1440 Fairmont Dr.

Idaho Falls, ID 83404

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

Same

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: Connie Walter

Printed Name: Connie Walter

Capacity: owner

(see instruction # 8 on back of form)

Revision 12/99

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IDAHO SECRETARY OF STATE  
05/28/2002 05:00  
CK: 5884 CT: 158810 BH: 468104  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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