



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2014 SEP 22 AM 9:14

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

DateManChallenge

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

Name

Complete Address

Johnathan VanDerschaaf

14403 North San Juan Ave. Nampa, ID. 83651

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

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

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

DateManChallenge

14403 North San Juan Ave. Nampa, ID 83651

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  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

09/22/2014 05:00

CK:CASH CT:301334 BH:1442091  
1@ 25.00 = 25.00 ASSUM NAME #2

Signature: Johnathan VanDerschaaf

Printed Name: Johnathan VanDerschaaf

Capacity/Title: Sole Proprietor

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

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