

Capacity/Title:

## **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.

2014 JUL 21 AM 9: 38

## Please type or print legibly. Instructions are included on back of application.

Instructions are included on back of application.	SEORETARY OF STATE
1. The assumed business name which the undersigned business is:	, ,
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  Donald P Christers	
3. The general type of business transacted under the  Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed:  DONALLO & Christonses  P. O. B. C. G. G. B. S.	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	.Z33.000
Printed Name: DOWALD PCHLISTUS IN Capacity/Title: DCPAJOR	Secretary of State use only  IDAHO SECRETARY OF STATE  07/22/2014 05:00  CK:101 CT:299213 BH:1434126  16 25.00 = 25.00 ASSUM NAME #
Signature: Was Charles	D172689
Printed Name: DOWDLA H. Christensen	11112607

abri.pmd Rev. 07/2010