

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

To the SECRETARY OF STATE, STATE OF IDAHO

09 SEP 17 AM 9:00

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business NameSECRETARY OF STATE  
STATE OF IDAHO

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

STOOR'S Market

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

<u>Name</u>	<u>Complete Address</u>
<u>ISHAQ BISHARAT</u>	<u>1570 Vernon Ave BLACKFOOT ID 83221</u>
<u>YACOOB BISHARAT</u>	<u>805 S. BROADWAY BLACKFOOT ID 83221</u>
<u>IBRAHIM BISHARAT</u>	<u>1150 MONEGAN Rd. White Fish, Montana 59937</u>

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 type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input 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): \_\_\_\_\_

STOOR'S Market  
805 SOUTH BROADWAY  
BLACKFOOT, IDAHO 83221

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

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

Signature: Ishaaq Bisharat

Printed Name: ISHAQ BISHARAT

Capacity: owner manager

(see instruction # 8 on back of form)

Revision 2/97

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Secretary of State use only  
IDAHO SECRETARY OF STATE

09/17/1997 09:00  
CK: 6608 CT: 87272 BH: 39153

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