



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.

FILED EFFECTIVE

2004 JUL 21 AM 8:49

SECRETARY OF STATE
STATE OF IDAHO

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

Bayview Bistro and Delicatessen

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

David C. Barnett

16716 Almos Court

Naomi G. Barnett

16716 Almos Court, Bayview, Id. 83803

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

David C. Barnett

10620 N. Oak St.

Hayden Lake, Id. 83815

Submit Certificate of
Assumed Business
Name and \$25.00 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):

Phone number (optional):

208 772 9749

Signature:

Naomi G Barnett
David C Barnett
(signature required)

Printed Name:

DAVID C. BARNETT

Capacity/Title:

owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
07/21/2004 05:00
CK: 44696416988 CT: 158818 BH: 756549
1 @ 25.00 = 25.00 ASSUM NAME # 2

2 word forms only: format: 0.05
Revised 04/2003

D 78407



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-104, Idaho Code, the undersigned submits for filing a Certificate of Assumed Business Name

2004 JUL 21 AM 8:52

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SEC. _____ STATE
STATE OF IDAHO

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

Advantage Home Inspection Co.

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

Corey Schomer

8809 W. Stirrup St.

Boise, ID 83709

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

Corey Schomer

8809 W. Stirrup St.

Boise, ID 83709

Submit Certificate of
Assumed Business
Name and \$25.00 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):

Phone number (optional):

Secretary of State use only

Signature: Corey Schomer

(signature required)

Printed Name: Corey Schomer

Capacity/Title: _____

See instructions # 25 on back of form

IDAHO SECRETARY OF STATE
07/21/2004 05:00
CK: 1163 CT: 158010 BH: 756551
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 78408