



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2018 APR 20 AM 9:22

SECRETARY OF STATE
STATE OF IDAHO

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

Mimi's Place

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Sander Mander Inc 918, West Alameda St., Pocatello, Idaho 83201

(Name) (C 217680) (Address)

(Name) _____ (Address) _____

(Name) _____ (Address) _____

(Name) _____ (Address) _____

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

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

4. Mailing address for future correspondence:

Mimi's Place c/o Sander Mander Inc.

(Name)

918 West Alameda St.

(Address)

Pocatello Idaho 83201

(City) (State) (Zipcode)

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

Mimi's Place c/o Kim B. Loveland

(Name)

P.O. Box 4517

(Address)

Pocatello, Idaho 83201

(City) (State) (Zipcode)

Printed Name: Katie Sanders for Mander Sande

Signature: [Signature]

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/20/2018 05:00

CK:1348 CT:81054 BH:1639628

1@ 25.00 = 25.00 ASSUM NAME #3

D202432