Capacity: NUMEY

(see instruction # 8 on back of form)

	CERTIFICATE OF ASSU (Please type or print legibly.	JMED BUSINES NAME See instructions on reverse.
	To the SECRETARY OF STATE, ST. Pursuant to Section 53-504, Idea gives notice of adoption of an	laho Code, the undersigned 15 Air 8:58
1.	The assumed business name which the ubusiness is: Willy's Place	undersigned use(s) in the transaction of
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>	Complete Address
	Mary A. Feltner	3500 W. Bellomy Ln.
		Borse, Is 83703
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	 ☐ Retail Trade ☐ Wholesale Trade ☐ Agriculture ☐ Construction 	Finance, Insurance, and Real Estate
4.	4. The name and address to which future Phone number (optional): correspondence should be addressed:	
	3500 W. Bellomy Ln.	Submit Certificate of Assumed Business
	BOISE, 1D 83703	Name and \$20.00 fee to:
5	Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson ent Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
		100HO SECRETARY OF STATE 95/15/2000 09:00 CX: 309274513 CT: 131117 PM: 317047
Signatu	ire: x May A ferrer	G5/15/2000 G9:00 CK: 389274513 CT: 131117 BH: 317947
Printed	Name: X MARY A FEITHER	1 € 20.00 = 20.00 ASSUM NAME # 2

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