Signature: Sulrus

Printed Name: Blue

(see instruction # 8 on back of form)

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE
09 MAR 11 AM 8: 47

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECHETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the up business is:	ndersigned use(s) in the transaction of
The Scruffy Hav)
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Peverly D. Fisher	2429 N. Lark Ave
	Mexidian. Id
	83646.3473
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation Wholesale Trade Construction	n and Public Utilities
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720
Beverly D. Fisher 2429 N. Lark Ave	Boise ID 83720-0080 (208) 334-2301
Mendian, Ita 83646-347	
5. Name and address for this acknowledgm	ent
COPy is (if other than # 4 above):	
	Secretary of State use only

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