



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

2004 AUG 19 A 8:39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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

The Cigarette Store

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

Jimmie L. Bristol

P.O. Box 69, Post Falls, Id 83854

Wilma L. Bristol

P.O. Box 69, Post Falls, Id 83854

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

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

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

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

Jim. L. Bristol

6175 N 17th St.

DALTON Gardens Id 83815

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

Phone number (optional):

(208) 762-2528

Signature: _____

Jim L Bristol
(signature required)

Printed Name: _____

Jim L. Bristol

Capacity/Title: _____

owner

(see instruction # 8 on back of form)

Secretary of State use only

DA 9313

IDAHO SECRETARY OF STATE
08/19/2004 05:00
CK: 513524172 CT: 158010 BH: 761759
1 @ 25.00 = 25.00 ASSUM NAME # 2