



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

**FILED EFFECTIVE**

**2016 OCT 21 AM 9:29**

SECRETARY OF STATE  
STATE OF IDAHO

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

MNL Shop

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):

Miriam Delgadillo

611 Cornwall Way Fruitland Idaho 83619

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☒ Retail Trade  
☐ Wholesale Trade  
☐ Services

☐ Construction  
☐ Agriculture  
☐ Manufacturing

☐ Transportation and Public Utilities  
☐ Mining  
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Miriam Delgadillo

(Name)

1805 N Allen Ave

(Address)

Fruitland

ID

83619

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Miriam Delgadillo

Signature:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

**10/21/2016 05:00**

CK:100 CT:330374 BH:1551844

10 25.00 = 25.00 ASSUM NAME #2

*D189923*