

## **CERTIFICATE OF** ASSUMED BUSINESS NAMEFILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2003 APR 24 AM 8: 23

Please type or print legibly. NOTE: See instructions on reverse before filing.

		STATE OF I <b>DAHO</b>
<ol> <li>The assumed business name which the und business is:</li> </ol>	dersigne	ed use(s) in the transaction of
_ Cringer's Taste Buds		
The true name(s) and <u>business</u> address(es business under the assumed business names).	) of the e	entity or individual(s) doing
Name	<b>.</b>	Complete Address
Gringer Williston	40 8	Bullpine Rd
	<u> P.o.B</u>	ox 546
	Idal	no City, ID 8363/
3. The general type of business transacted und	der the a	assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	and Pul	blic Utilities
☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining		Submit Certificate of
Finance, Insurance, and Real Estate		Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson
Λ		Basement West
Ginger Williston		PO Box 83720 Boise ID 83720-0080
Idaho City ID 83631	i	208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	nt	Phone number (optional):
Copy to (it other than # 4 above).		208-392-9988
		Secretary of State use only
Signature: Mingu Williston (signature required)	corp Vorms labn, p65 Revised 04/2003	IDANO SECRETARY OF STATE
Printed Name: Gringer Williston	forms labor form: Revised 04/2003	04/24/2003 05:00 _CK:_2_CT: 158010 BH: 676638
Capacity/Title: owner	a de la companya de l	1 @ 25.00 = 25.00 ASSUM NAME # 2

(see instruction # 8 on back of form)

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