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FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name of the STATE OF IDAHO

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

Peak Provisions

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name Cynthia L. Vincent Complete Address 1719 W. Roseberry Rd  
PO Box 104  
Donnelly ID 83615

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

☒ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities  
☒ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate  
☐ Services ☐ Construction ☐ Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-325-3048

Cynthia L. Vincent  
PO Box 104  
Donnelly ID 83615

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: Cynthia Vincent

Printed Name: Cindy Vincent

Capacity: owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE  
08/11/2005 05:00  
CK: 1753 CT: 158818 BH: 985675  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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