

FILED EFFECTIVE

227



## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 AUG 25 PM 2:28  
SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Mr. Mom's Take 'n' Bake

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
Christina Graham	525 S Middleton Rd St 101
	Middleton Id
	83644

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

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

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

Christina Graham  
Po Box 734  
Middleton Id 83644

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

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

Phone number (optional):

208-585-3349

Signature: C. Graham (signature required)

Printed Name: Christina Graham

Capacity/Title: Owner

(see instruction # 8 on back of form)

Information Form  
Revised 07/02/02

Secretary of State use only

0794180  
IDAHO SECRETARY OF STATE  
08/25/2004 05:00  
CX: 82521568812SLD CT: 172899 BH: 762846  
1 @ 25.00 = 25.00 ASSUM NAME # 2