CERTIFICATE OF ASSUMED BUSINESS FAMECTIVE (Please type or print legibly. See Instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO 00 JUN 15 PH 2: 09 Pursuant to Section 53-504. Idaho Code, the undersigned

	gives notice of adoption of an	Assumed Busi	ness Name Fidaho
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	EURO FOOD STORE		
2.	The true name(s) and business address business under the assumed business in Name NARCIS KURBEGOVIC	name is/are: Co 2243 CAST LE	y or individual(s) doing mplete Address E みん アルハ チみいら し とろろつ
	MUHIDIN KORJENIC	486 MAYR	ICE NORTH TWIN FALLS ID 83301
3.	The general type of business transacted (mark only those that apply)	under the assu	ımed business name is:
	Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	☐ Fir	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed: NARCIS KURBEGOVIC		
	2243 CASTLE DR.		Submit Certificate of Assumed Business
	TWIN FALLS ID 83301		Name and \$20.00 fee to:
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	ıent	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		8	Secretary of State use only IDAHO SECRETARY OF STATE
Signati	ure: MARCIS KURBEGOVIC	Revision 1/36	06/14/2000 09:00 X: 2256554369 CT: 132402 BH: 326332
Printed	I Name: NARCIS KURBEGOVIC	\$8	1 @ 20.00 = 26.00 ASSUM NAME # 2
Capac	ity:	rptformstabn.p65	D 36642
	(see instruction # 8 on back of form)	<u>\$</u>	- J 46 1 d

(see instruction # 8 on back of form)