



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

FILED EFFECTIVE

2003 AUG 11 P 2:05

SECRETARY OF STATE  
STATE OF IDAHO

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

SALINAS RAIDER'S EXPRESS CAFE

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

SALVADOR SALINAS

375 KATHLEEN DR. GRANDVIEW ID. 83624

BLANCA SALINAS

375 KATHLEEN DR. GRANDVIEW ID. 83624

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 / food          | <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:

SALINAS RAIDER'S EXPRESS CAFE

330 MAIN ST.

GRANDVIEW ID. \* 83624

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:  
25.00

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

Phone number (optional):

834-2214

Signature: Blanca L Salinas

Printed Name: Blanca L Salinas

Capacity/Title: 55

(see instruction # 8 on back of form)

Secretary of State use only

1067832

IDAHO SECRETARY OF STATE  
08/12/2003 05:00  
CK: 229 CT: 158010 BH: 695866  
1 @ 25.00 = 25.00 ASSUM NAME # 2