(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

08 JAN 23 AM 8: 12

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

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

	DELICIOUS ICE CREAM		
2.	The true name(s) and business address(es business under the assumed business nam Name SIGRID PENA TIRADO	s(es) of the entity or individual(s) doing name: Complete Address 6358 E MONROE ST NAMPA, ID 83687	
3.	The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities		
	 Wholesale Trade		Submit Certificate of Assumed Business Name and \$25.00 fee to:
	The name and address to which future correspondence should be addressed: 6358 E MONROE ST NAMPA, ID 83687		Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
			(208) 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above): SAME#		
			Secretary of State use only
ignat	ure: Dignioktuatinado (signature required)	corp/forms\abn forms\abn p65 Ravised 04/2003	
inted	d Name: SIGRID PENA TIRADO	forms\abn form: Revised 04/2003	IDAHO SECRETARY OF STATE 01/23/2008 05:00