Capacity/Title: <u>OW Ger</u>

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2003 OCT -9 AM 8: 54

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The appropriate braining a proper which the condensation	STATE. CA
 The assumed business name which the undersigned business is: 	ed use(s) in the transaction of
The Bridge Ca;	fé_
" "	
2. The true name(s) and <u>business</u> address(es) of the	entity or individual(s) doing
business under the assumed business name:	
Name	Complete Address
Shan Burkeson 72	11 Main
Todd Burleson Boi	nners Ferry, Id
	983805
0. The second of	
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu	ıblic Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
☐ Manufacturing ☐ Mining	Submit Certificate of Assumed Business
	Name and \$25.00 fee to:
☐ Finance, Insurance, and Real Estate	
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson Basement West
Shari Burleson	PO Box 83720
P.O. BOX 1749	Boise ID 83720-0080
Bonners Ferry Tol 83806	208 334-2301
Chimas I City, +a pools	
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	(308) 290-1157
	Secretary of State use only
Charles Paris	
gnature: Shari O Burleson	
inted Name: Shari O Burleson	IBAHO SECRETARY OF STATE 10/09/2003 05:00

10/09/2003 05:00 CK: 6610263588 CT: 158010 BH: 795812 1 0 25.00 = 25.00 ASSUM NAME # 2

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