

## **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.

2013 HAY 10 AM 9: 22

## Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAYO

1.	The assumed business name which the ur business is:	ndersigned use(s) in the transaction of
	PETE'S TAVERN	
2.	The true name(s) and <u>business</u> address(e business under the assumed business name  Name  BARR ENTERPRISES, INC.  (C119982)	
3.		n and Public Utilities
4.	The name and address to which future correspondence should be addressed: PETE'S TAVERN  11 12TH AVENUE SOUTH  NAMPA, ID 83651	Seeretary of State  Food North Ath Street  Food 837/0  Foods 1D 83720-0080
5.	Name and address for this acknowledgme copy is (if other than # 4 above):  N/A	
۸.		Secretary of State use only
•	ature:	
	ed Name: LINDA BARR	
	acity/Title: PRESIDENT	IDAHO SECRETARY OF STATE
Signa		05/10/2013 05:00 CK; 3615004277 CT: 83458 BH: 1373357 1 8 25.68 = 25.68 ASSUM NAME # 2
Printed Name: GARY BARR Capacity/Title: SECRETARY		
	·····	D163162

abn.pmd Rev.07/2010