

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.

DAGWOOD DELI	
The true name(s) and business address business under the assumed business named business na	(es) of the entity or individual(s) doing name:
Name	Complete Address
IDAHO BILLIE, LLC	1735 W. KATHLEEN AVE. #3
w 20684	COEUR D ALENE, ID. 83815
3. The general type of business transacted	
Retail Trade Transportat Wholesale Trade Construction	ion and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
DAGWOOD DELI	Basement West PO Box 83720
1735 W. KATHLEEN AVE., #3	Boise ID 83720-0080
COEUR D ALENE, ID. 83815	208 334-2301
Name and address for this acknowledgment	ment Phone number (optional):
COPy is (if other than # 4 above):	208 667-1619
	Secretary of State use only
gnature:	- LOOK SECRETARY OF STATE 11/21/2002 05 (CK: 1172 CT: 163415 BH: 64)
apacity/Title:MEMBER	11/21/2002 05:
(see instruction # 8 on back of form)	CK: 1172 CT: 163415 BH: 64

D 60197