

CERTIFICATE OF ASSUMED BUSINESS NAME

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

	CERTIFICATE OF ASSUMED BUSINESS	2.
	Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B	e undersigned
	Please type or print legibly.	STATE OF THE STATE
	Instructions are included on back of app	lication.
1.	The assumed business name which the und business is: Sister Chick's	dersigned use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es business under the assumed business name Name CDC Futures, Inc. (C176193)	, , ,
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Diane H Cluff a394 Mountain View Br Emmett, 1D 83617	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	at .
Signa	nture: Dranit Cluff	Secretary of State use only
Printe	ed Name: Diane H. Cluff	
Capacity/Title: President		IDAHO SECRETARY OF STATE 01/03/2013 05:00
Signature:		CK: 1109 CT: 277839 BH: 1354104 1 0 25.00 = 25.00 ASSUM NAME # 2
Printe	ed Name:	N (1 A 12 2
Canacity/Title:		D (60123

9/21/2012

Capacity/Title: