



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

FILED EFFECTIVE

2012 FFR -6 AIII:22

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is: ✓

Casa de Flame Thrower

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Tim Fristoe

Complete Address
202 W Sunset Ave
Coeur d'Alene, ID 83815

3. The general type of business transacted under the assumed business name is:

Retail Trade Transportation
 Wholesale Trade Construction
 Services Agriculture
 Manufacturing Mining
 Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

Tim Fristoe
202 W Sunset Ave
Coeur d'Alene, ID 83815

5. Name and address for this acknowledgment
copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Printed Name: Tim Foster

Capacity/Title: Owner

Signature:

Printed Name: _____

Capacity/Title:

Secretary of State use only

IDaho SECRETARY OF STATE
02/06/2012 05:00
CK: 896988 CT: 172099 BH: 1309430
1 P 25.00 = 25.00 ASSUM NAME # 2

DI 53080