



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2013 MAY 30 AM 9:08

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:

Two Moms Baking
PO Box 794 - Hailey ID 83333

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

Name
Janis K Walton
Amber L Avila

Complete Address
317 E Cedar Street Bellevue, Id 83373
415 N 3rd Street Bellevue, Id 83313
PO Box 4063 - Hailey Id 83333

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

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

Two Moms Baking
PO Box 794
Hailey ID 83333

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

Amber Avila or Janis Walton
PO Box 4063
Hailey Id 83333

317 E Cedar St, Bellevue ID
83313

Signature: Janis K Walton

Printed Name: Janis K Walton

Capacity/Title: Owner

Signature: Amber L Avila

Printed Name: Amber L Avila

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
05/30/2013 05:00
CK: 1487 CT: 283732 BH: 1375990
1 @ 25.00 = 25.00 ASSUM NAME # 2

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