

FILED/EFFECTIVE



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.

01 JUL 17 AM 8:32

STATE OF IDAHO

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

Sandwiched Inn Deli

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

Name

Linda M. Thomas

Complete Address

Po Box 508, Fairfield, Idaho 83327

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	

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

Linda M. Thomas
Po Box 508
Fairfield, Idaho 83327

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

Signature: Linda M. Thomas

Printed Name: Linda M. Thomas

Capacity: Owner

(see instruction # 8 on back of form)

Secretary of State use only

9-1 CorpForm1000 form1000.pdf
Revised 01/2001

IDaho SECRETARY OF STATE
07/18/2001 05:00
CK: 281 CT: 148931 BH: 408275
1 @ 20.00 = 20.00 ASSUM NAME # 2

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