



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 JAN 16 PM 2:19

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:

Sweet Sister's Treats

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

Name

Complete Address

Cassidy Campbell

1217 Falcon St. Caldwell ID 83607

Tina Pate

8082 E. Shallen Dr. Camp ID 83687

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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:

Sweet Sister's Treats
1217 Falcon St.
Caldwell ID 83607

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

Signature: Cassidy Campbell

Printed Name: Cassidy D Campbell

Capacity/Title: Co-owner

Signature: Tina Pate

Printed Name: Tina Pate

Capacity/Title: Co-owner

Secretary of State use only

0168229

IDAHO SECRETARY OF STATE
01/16/2014 05:00
CK: 1673655 CT: 172899 BH: 1406417
1 @ 25.00 = 25.00 ASSUM NAME # 2