Printed Name:

(see instruction # 8 on back of form)

Capacity:

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned All 10: 12 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: TCBY Treats 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name

	Brenda, Berger	821	Todd	
	Mitch Berger	Chu	ubbuck, ID	83202
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)			
	Retail Trade	g 🗌	Transportation and Finance, Insurance Mining	
4.	The name and address to which future correspondence should be addressed:			
	1023 Yellowstone SuiteA Pocatello, ID 83201		Submit Certifica Assumed Busin Name and <b>\$20.</b>	ess
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		Secretary of Sta 700 West Jeffer Basement West PO Box 83720 Boise ID 83720 208 334-2301	rson t
	<u>Uhubbuck</u> , LD 83202		Secretary of State	use only

IDAHO SECRETARY OF STATE

03/31/1999 09:00 CK: 1615 CT: 113368 BH: 282419

1 @ 20.00 = 20.00 ASSUM NAME # 2

ME,

Real Estate

D24584