



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

11 DEC 27 PM 2:00

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:

Cave 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

Sandra Lynn Kent

PO Box 158 Kootenai, ID 83840

Daniel Duane Kent

PO Box 158 Kootenai, ID 83840

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

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

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

Sandra Kent

444 N Main Street

Sandpoint, ID 83864

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

Signature: _____

Printed Name: Sandra Lynn Kent

Capacity/Title: Owner

Signature: _____

Printed Name: Daniel Duane Kent

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
12/27/2011 05:00
CK: 061571 CT: 172099 BH: 1303331
1 @ 25.00 = 25.00 ASSUM NAME # 2

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