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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B <u>Please type or print legibly.</u> Instructions are included on back of app	FILED EFFECTIVE e undersigned usiness Name. 2015 MAR 17 AM 11: 38 SECRETARY OF STATE
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:         <u>AS YOU WISH CATERINH</u> <u>AS YOU WISH CATERINH</u> <u>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:         <u>Name Complete Address</u> <u>KARI RANDEL 1005 S JOHNSON ST</u> <u>BOISE ID 83705</u> <u>BOISE ID 83705         </u> <u>BOISE ID 805         </u> <u>BOISE ID 805   </u></u></li></ol>	
<ul> <li>3. The general type of business transacted un</li> <li>Retail Trade</li> <li>Wholesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li><u>KAPI PANOEL</u></li> <li><u>1005 S JOHNSON ST</u></li> <li><u>EOISE ID B3705</u></li> <li>5. Name and address for this acknowledgmer copy is (if other than #4 above):</li> </ul>	and Public Utilities Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Printed Name: Capacity/Title: Signature: Printed Name: Capacity/Title: Capacity	Secretary of State use only IDAHO SECRETARY OF STATE 03/17/2015 05:00 CK:CASH CT:158010 BH:1466616 10 25.00 = 25.00 ASSUM NAME #2 DITT601

abn.pmd Rev. 07/2010