



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 AUG 16 AM 9:04

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:

Idaho Five Star Funnel Cakes & Grill

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

Guillermo L Loverde

11108 Orchard Ave, Nampa, Id 83651

Niki Jo Loverde

11108 Orchard Ave, Nampa, Id 83651

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 | |

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:

11108 Orchard Ave

Nampa, Id 83651

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

11108 Orchard Ave

Nampa, Id 83651

Signature: *Guillermo L Loverde*

Printed Name: Guillermo L Loverde

Capacity/Title: Owner/Manager

Signature: *Niki Jo Loverde*

Printed Name: Niki Jo Loverde

Capacity/Title: Owner/Manager

Secretary of State use only

IDAHO SECRETARY OF STATE
08/16/2012 05:00
CK: 620524 CT: 273327 BH: 1336077
1 @ 25.00 = 25.00 ASSUM NAME # 2

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