

## CERTIFICATE OF **ASSUMED BUSINESS NAME**

FILED EFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned 2007 JAN 19 AN 9: 05

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Lizzie's	on the Lake
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:     Name     Complete Address	
Elizabeth A. Fees	2206 W. James Crowe Dr., Hayden ID 83835
3. The general type of business transacted u    Retail Trade	n and Public Utilities  Submit Certificate of Assumed Business
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent Phone number (optional):  208-772-6927
	Secretary of State use only
gnature: Lydrut ()	UK 2339
inted Name: Elizabeth A. Fees  apacity/Title: Owner	IDAHO SECRETARY OF STATE  91/19/2007 05:0  CK: 3383 CT: 158818 BH: 18273 1 8 25:08 = 25.00 ASSIM MANE