

Capacity/Title: <u>OW/NEA</u>

(see instruction # 8 on back of form)

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

Pursuant to Section 53-504, Idaho Code, the undersigned

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2007 JUL 17 AM 8:21

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

SECRETARY OF TATE STATE OF IDA O

The assumed business name which the undersign business is:      BACK IN THE K	
	c entity or individual(s) doing  Complete Address  25561 NORTH RIDGE DR.  EWISTON, ID 83501
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction	
<ul><li>✓ Services ☐ Agriculture</li><li>☐ Manufacturing ☐ Mining</li><li>☐ Finance, Insurance, and Real Estate</li></ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  BACK IN THE KITCHEN  SCHOOL OF COOKING  P.O BOX IIII JENISTON, T.D.	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 798-1699
ignature: Manula S. Imphemour	Secretary of State use only
rinted Name: PAMELA S. LMDHENOUR	IDAHO SECRETORY OF OTATE

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