

Signature:\_

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILE EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

2015 OCT -1 AM 8: 24

	W	Filing fee: \$25.00.			
4	<b>-</b> ,			SECR	ETARY OF STATE
1.	The assumed business name which the undersigned use(s) in the transaction of business is AHO				
		JAPILO!	S PERUVIAN	) KESTAURANT.	
^	The second second				
<ol> <li>The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):</li> </ol>					
ſ	MARITZA (Name)	J. GRIPFITH	<u>&gt; 825.</u> (Address)	State St. PRESTON =	LD · 83263
	(reality)		(**************************************		
	(Name)		(Address)		
	(Name)		(Address)		
		······································			
	(Name)		(Address)		
3. The general type of business transacted under the assumed business name is:					
	Retail T	ſrade	Construction	☐ Transportation and Pub	alic Utilities
		sale Trade	Agriculture	Mining	
	X Service		Manufacturing	Finance, Insurance, an	d Real Estate
	<b>,</b>		-		
4.	1. Mailing address for future correspondence:  HACITZA D. GRUPFITHS  (Name)  82 S. STate ST.			5. Name and address for this ac	knowledgment
				CODY IS (if other than #4):	
				MARITZA CORIPZII	<u> </u>
				1545 Highland dr	
	(Address)			(Address)	*
	PRESTON	エリ	83263	North Logs N (State	2T 84341
	(City)	(State	(Zipcode)	(Ofty) (State	(Zipcode)
Printed Name: MARITZA GRIPPITHS				Secretary of State use of	nly
		to the auto	<b>(</b> 20)		
Signature: Range Confill				IDAMO SECRETARY OF STATE	
Printed Name:				10/01/2015 05:00 CK:121 CT:315184 BH:1494546	
Signature:				16 25.00 = 25.00 2	
SIC	gnature:				
Pri	nted Name:			7 121-	772
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