

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

07 SEP 20 AM 8: 18

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

SECRETARY OF STATE STATE OF IDAHO

FILED EFFECTIVE

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

1. The secured hydron name which the section	
 The assumed business name which the undersign business is: 	ned use(s) in the transaction of
Armando's Best Fram	
	J
2. The true name(s) and business address(es) of the	e entity or individual(s) doing
business under the assumed business name: Name	2
	Complete Address
Filso Armando Menjivar 2/2	Hudson A, Nampa JD 83
3. The general type of business transacted under the	e assumed business name is:
☐ Retail Trade ☐ Transportation and P	Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	idaho Secretary of State 450 N 4th Street
correspondence should be addressed:	PO Box 83720
Filso Armando Menjivar	Boise ID 83720-0080
212 Hudson Ave.	(208) 334-2301
Nampa, FD 83651	
5. Name and address for this acknowledgment	* • • · · · · · · · · · · · · · · · · ·
COPY is (if other than # 4 above):	
	Secretary of State use only
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gnature: filso frmon to Meyivar ages (signature required)	
inted Name: Filso Armando Menjitar	IDAHO SECRETARY OF STATE
pacity/Title: Owner ge	CK: 1181 CT: 158818 BH: 1876

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