



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

2002 JUN 20 PM 2:14

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

TRACY'S ESPRESSO & YOURS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

TRACY HOLTAN

Complete Address

1611 1/2 Caldwell Blvd. Nampa Id
83651

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

TRACY HOLTAN
8083 WATERFOWL AVE
NAMPA, ID 83657

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

Mountain West Bank
2024 Caldwell Blvd.
Nampa, Id 83651 - Jelicica

Signature: Tracy Holtan

Printed Name: Tracy Holtan

Capacity/Title: proprietor

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208-468-0366

Secretary of State use only

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IDAHO SECRETARY OF STATE
06/20/2002 05:00
CK: 1001 CT: 150010 DN: 473019
1 @ 20.00 = 20.00 ASSUM NAME # 2