

## 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 2015 JUN 18 AM 8: 34

SECRETARY OF STATE

## Please type or print legibly. Instructions are included on back of application.

E. The true name(s) and business address(es	s) of the entity or individual(s) doing
business under the assumed business name	me:
Name	Complete Address
Lewis Enterprises L.L.C. W149974	731 Aberdeen Drive Nampa ID 83686
3. The general type of business transacted ur	nder the assumed business name is:
■ Retail Trade ☐ Transportation	n and Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	<del></del>
Manufacturing Mining	Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future	Constant of Olds
correspondence should be addressed:	Secretary of State 450 North 4th Street
Kim Lewis	PO Box 83720
PO Box 907	Boise ID 83720-0080
Nampa ID 83653	208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	nt
Should With	Secretary of State use only
nature: The state of the state	
Kim K Louis	
ited Name: Kim K Lewis	IDAHO SECRETARY OF STAT 06/18/2015 05:00
nted Name: Kim K Lewis pacity/Title: Owner pature:	IDAHO SECRETARY OF STAT 06/18/2015 05:00 CK:2033 CT:231404 BH:14 10 25:00 = 25:00 ASSUM N

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Capacity/Title: