

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

10 MAR -1 AM 8:31

SECRETARY OF STATE STATE OF IDAHO

Paradise	Valley Coffee
The true name(s) and business address(e business under the assumed business name Name Jeffrey D Hoagland	es) of the entity or individual(s) doing me: Complete Address 404 Brook Lane Naples, ID 83847
3. The general type of business transacted up Retail Trade	n and Public Utilities
 Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Jeffrey D Hoagland 	Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
404 Brook Lane Naples, ID 83847	(208) 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent
	Secretary of State use only
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