Printed Name:_

Capacity/Title: UWN 0

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersig submits for filing a certificate of Assumed Business Nature Please type or print legibly. NOTE: See instructions on reverse before filing.	ame, AM 9:03
1. The assumed business name which the undersigned business is: La Fiesta Mexican Resta	
2. The true name(s) and business address(es) of the e business under the assumed business name: Name Nicolo E Glicerio Estrada 1288	Complete Address
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Color Glandts Crest Wald Mary Mary Mary Mary 1 d 831087 Sharp South Color of the strength	
10 11 Po Entrada	

IDAHO SECRETARY OF STATE Ø4/29/2004 Ø5:00 CK: 2493 CT: 158010 BH: 742080 1 0 25.00 = 25.00 ASSUM NAME # 2