

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2013 OCT 21 AM 9: 24

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

SECRETARY OF STATE

d. The accounted by single pages which the	STATE OF IDAHO
 The assumed business name which the business is: 	e undersigned use(s) in the transaction of
Kat's Rascals	
The true name(s) and <u>business</u> addres business under the assumed business	• • • • • • • • • • • • • • • • • • • •
Name	Complete Address
Katrin Spilde	5075 Highway 95 North / P.O · Box 43
	Viola, Idaho 83872 Viola, IDAHO 8387
	(Physical) (MAILING)
3. The general type of business transacte	ed under the assumed business name is:
Retail Trade Transporta Wholesale Trade Construct Services Agricultur	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Katrin Spilde DBA Kat's Rascals	Secretary or State
P.O. Box 43	Boise ID 83720-0080
Viola, Idaho 83872	208 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above):	gment
	Secretary of State use only
signature: // // // // // // // // // // // // //	—
Printed Name: Katrin Spild	
Capacity/Title: Owner/Operator	TRAIN APARTANY OF STATE
Signature:	IDAHO SECRETARY OF STATE 19/21/2013 05:200
Printed Name:	CK: 1943 CT: 288795 BH: 1394793

1 0 25.90 = 25.00 ASSUM NAME # 2

D 166493

Capacity/Title: