

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

2015 SEP 16 AM 8: 30

10	Filing fee: \$	325.00.	201	A 051 10 HI 0- 38	
1. TI	SECRETARY OF ST The assumed business name which the undersigned use(s) in the transaction of business is AHI			ECRETARY OF STATE	
	reasure Valley Bean		(-,	1437 31 10	
	reasure valley bear	3			
	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):				
	Jose Cuellar	2014 Wildflower	Dr Nampa Id 83686		
1)	Name)	(Address)			
7)	Name)	(Address)			
1)	Name)	(Address)			
1)	Name)	(Address)			
3. Tr	ne general type of bus Retail Trade Wholesale Trade Services	siness transacted under Construction Agriculture Manufacturi	Mining		
4. M	ailing address for futu	ure correspondence:	5. Name and address for this copy is (if other than #4):	s acknowledgment	
J	Jose Cuellar		N/A	• •	
•	ame)		(Name)		
	014 Wildflower Dr		(Address)		
	lampa ID 83686		(10.01)		
ठ	ity)	(State) (Zipcode)	(City)	(State) (Zipcode)	
Printed Name: Tose Luis Cuellar			Secretary of State	use only	
Signa	ature:				
			· ·	1DAHO SECRETARY OF STATE 09/16/2015 05:00	
Printed Name:			CK: 17229177987 CT:	158010 BH:149251	
Signa	ature:		16 25.00 = 25.0	D ASSUM NAME #2	
Printe	ed Name:		D INI.	ı	
Signature:			1)1814	63	

Rev. 08/2015