CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)



	the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-504, Idaho Cod gives notice of adoption of an Assumed	e, the underi Business Na	ame.	
1.	The assumed business name which the unbusiness is:	dersigned us	e(s) in the transaction of	
	LA UNICA DE MICH	HOACAN		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	Jose Luis Toyar	1 - 1 -	Complete Address 1049 Sweetwood Circle, No	
	Maria R. Tovar	San	ໍດລ	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)			
•	Retail Trade	Fin	insportation and Public Utilities ance, Insurance, and Real Estate ning	
4.	The name and address to which future Correspondence should be addressed:			
	1212 9th St. S.		Submit Certificate of Assumed Business	
	Dampa, ID		Name and \$20.00 fee to:	
5.	Name and address for this acknowledgmen copy is (# other than # 4 above):	it	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
		4	Secretary of State use only IDAHO SECRETARY OF STATE	
A	ire: Jase Luis Towar	Bertation 2/1	09/26/1997 09:00 DX: 344 CT: 87734 BH: 41997	
natu	ITE: UGG FUIS TOWAR		1 0 20.00 = 20.00 ASSUM HAME	

Sig

Printed Name: __ Capacity: wnek

(see Instruction # 8 on back of form)

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