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

	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	no Code, the undersigned
1.	The assumed business name which the und business is:	
	Jay : Deyerr Jay's Bayeare	
2.	The true name(s) and business address(es) business under the assumed business nam	· · · · · · · · · · · · · · · · · · ·
	Jason Libber	515 F Lincoln Nimps Id 83686
	Jasin Libber	
3.	The general type of business transacted un (mark only those that apply)	der the assumed business name is:
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	☐ Finance, Insurance, and Real Estate ☐ Mining
4.	The name and address to which future Placerespondence should be addressed:	hone number (optional): 403-1012
	Jay's Daycere 515 1/2 E"Lincoln Namps 2d	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
		208 334-2301  Secretary of State use only
gnatı	ire: Iran Lilla	IDAHO SECRETARY OF STATE  93/15/2000 09:00  CK: CASH CT: 128269 BH: 299400
	T 4 1 1	1 8 20.00 = 20.00 ASSUM NAME # 2

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Printed Name: Vason Libbec

Capacity: \_\_

(see instruction # 8 on back of form)