## FILED EFFECTIVE



## CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

2018 AUG -9 AM 8: 56

SECRETARY OF STATE STATE OF IDAHO

| 1.                        | The assumed business name which the undersigned use(s) in the transaction of business is:  Double Decker Espresso  |                                       |  |  |             |     |
|---------------------------|--|---------------------------------------|--|--|-------------|-----|
|                           |  |                                       |  |  |             |     |
|                           |  |                                       |  |  |             |     |
| 2.                        | 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): |                                       |  |  |             |     |
|                           | Dustin Mori  | 15503 Hwy 44 Caldwell, ID 83607       |  |  |             |     |
|                           | (Name)   | (Address)                             |  |  |             |     |
|                           | Angie Mori   | 15503 Hwy 44 Cald                     | Caldwell, ID 83607   |  |             |     |
|                           | (Name)   | (Address)                             |  |  |             |     |
|                           | (Name)   | (Address)                             |  |  |             |     |
|                           | (Name)   | (Address)                             |  |  |             |     |
| 3.                        | The general type of business transacted under the assumed business name is:  |                                       |  |  |             |     |
|                           | Retail Trade   | Tra                                   | Transportation and Public Utilities  |  |             |     |
|                           | Wholesale Trade  | Agriculture                           | ∐ Mir  | ning   |             |     |
|                           | ★ Services   | Manufacturing                         | L Fin  | ance, Insurance, and Re                      | eal Estate  |     |
| 4.                        | Mailing address for future   | correspondence:                       | 5. Name and copy is (if a  | d address for this acknow<br>other than #4): | wledgment   |     |
|                           | Double Decker Espresso   |                                       | <del></del>  | <del></del>                                  |             |     |
|                           | (Name)<br>15503 Hwy 44   |                                       | (Name)   |  |             |     |
|                           | (Address)  | · · · · · · · · · · · · · · · · · · · | (Address)  | <u> </u>                                     |             |     |
|                           | Caldwell, ID 83607   |                                       |  |  |             |     |
|                           | (City)   | (State) (Zipcode)                     | (City)   | (State)                                      | (Zipcode)   |     |
| Printed Name: Dustin Mori |  |                                       | Secretary of State use only  |  |             |     |
| Sig                       | gnature: 855m  | Mes                                   |  | THIUA SECRETARY OF S                         | enera in va |     |
| Printed Name: Angie Mori  |  |                                       | 10AHO SECRETARY OF STATE<br>08/09/2018 05:00<br>CK:1529 CT:361660 BH:1658003 |  |             |     |
|                           |  |                                       |  |  |             | Się |
| Pri                       | nted Name:   |                                       |  |  |             |     |
| Signature:                |  |                                       |  | D204656                                      |             |     |

Rev. 08/2015