

## 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.

11 AUG 22 AM 9: 25

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

SECHE BY OF STATE STATE OF IDAHO

	CC's Cupcake Cafe			
2.	The true name(s) and <u>business</u> address(estable) business under the assumed business name  Name	ame: Complete Address		
			3 N. Sharon Ave.	
		<u>Meridian, I</u>	ID 83646	
3.	The general type of business transacted under the assumed business name is:  Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture			
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	•	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:	
4.	The name and address to which future correspondence should be addressed:  CC's Cupcake Cafe  2853 N. Sharon Ave.		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080	
	Meridian, ID 83646		208 334-2301	
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent		
Signa	ature: Christina amold		Secretary of State use only	
Printe	ed Name: Christina Arnold			
Capa	city/Title: Owner			
Signature:			IDAHO SECRETARY OF STATE  28/22/2011 05:00  CK: 2829 CT: 158816 BH: 1287549  1 8 25.88 = 25.88 ASSUM HAME # 2	
	Printed Name:			
Cana	oity/Titlo:			

abn.pmd Rev. 07/2010

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