

Capacity/Title:__

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.

10 AUG -3 AM 8: 34

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

SECRETARY OF STATE STATE OF IDAHO

	The assumed business name which the und business is: Corner Cafe Catering	lersigned	use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es) business under the assumed business nam Name Ray's Corner Cafe, LLC (W90401)	e:	ntity or individual(s) doing Complete Address v 55 Horseshoe Bend, ID 83629
3.	he general type of business transacted under X Retail Trade Transportation an X Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		
4.	The name and address to which future correspondence should be addressed: Stephen Whiteley P.O. Box 351		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Horseshoe Bend, ID 83629 Name and address for this acknowledgmen copy is (if other than # 4 above):	it	208 334-2301
	ture: Stephen Whiteley		Secretary of State use only
rinted Name: Stephen Whiteley Capacity/Title: Owner Signature:			IDAHO SECRETARY OF STATE 08/03/2010 05:00 CX: 7561 CT: 244638 BH: 1233232 1 @ 25.00 = 25.00 ASSUM NAME # 2