

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILEDEFFECTIVE

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

	CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed B Please type or print legibly.	S NAME the undersigned
	Instructions are included on back of app	oplication.
1.	The assumed business name which the unbusiness is:	undersigned use(s) in the transaction of  Lazy Lamb
2.	The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u>	* * * * * * * * * * * * * * * * * * * *
	Lazy Lamb Enterprises L.L.C.  W 1/2070	338 Bay Horse Road Bellevue, ID 83313
3.	The general type of business transacted under the Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	on and Public Utilities  n  Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed:  Lazy Lamb Enterprises L.L.C.  c/o Ross Copperman  338 Bay Horse Road Bellevue, ID 83313	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	ent
Signa		Secretary of State use only
Printed Name: Jacob Nelsen  Capacity/Title: Member IDAHO SECRETARY OF STATE		
Signature:		03/15/2012 05:00 CK: 1117 CT: 268214 BH: 1315397
Printed Name:		
Capacity/Title:		D154021

abn.pmd Rev. 07/2010