

FILE



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**Please type or print legibly.**  
**NOTE: See Instructions on reverse before filing.**

06 SEP 28 PM 12:31

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Egyptian Smoke Shop

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Saad Al-Shemasawi

Complete Address

4803 Kootenai #47 Boise, Idaho 83705

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

4. The name and address to which future correspondence should be addressed:

Saad Al-Shemasawi

4803 Kootenai #47 Boise, Idaho 83705

Phone number (optional):

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

(signature required)

Printed Name: Saad Al-Shemasawi

Capacity/Title: Owner / Operator

(see instruction # 8 on back of form)

Secretary of State use only

IDaho SECRETARY OF STATE  
09/28/2006 05:00  
CK: 923763 CT: 172099 BH: 977637  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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