



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.

FILED EFFECTIVE

10 APR 21 AM 8:44

SECRETARY OF STATE
STATE OF IDAHO

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

Lake Dawg Snacks

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

Name

Complete Address

Christopher Lake

Sharon Lake

2539 W. Beth Ln.

2539 W. Beth Ln.

Post Falls, ID 83854

Post Falls, ID 83854

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 | |

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

Chris and Sharon Lake

2539 W. Beth Ln.

Post Falls, ID 83854

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Signature: *Christopher Lake* *Sharon Lake*

(signature required)

Printed Name: Christopher Lake/Sharon Lake

Capacity/Title: Owner/Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\compform\slm form\slm.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
04/21/2010 05:00
CK: 594 CT: 150010 IN: 1218675
1 @ 25.00 = 25.00 ASSUM NAME # 2

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