

227



# 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**

2002-1 11 9:06

STATE OF IDAHO

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

The Pizza Place

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

William Michael Mollaley 221 High St. Priest River ID 83856  
Patty Darlene Totland 221 High St. Priest River ID 83856

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:

William Mollaley  
PO Box 292  
Priest River ID 83856

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

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

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

Phone number (optional):

Secretary of State use only

Signature: Patty D Totland

Printed Name: Patty D Totland

Capacity/Title: Partner

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE  
03/01/2002 05:00  
CK: 4041 CT: 150045 BH: 449259  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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