



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE
2004 APR - 2 AM

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

~~Kuna~~ Kavemen Deli

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
<u>James Mahan</u>	<u>642 N Quartermoon Ave Kuna Id 83634</u>
<u>Betty Mahan</u>	<u>642 N Quartermoon Ave Kuna Id 83634</u>

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Kavemen Deli - James Mahan
225 Kay Ave
Kuna Id 83634

Submit Certificate of Assumed Business Name and \$25.00 fee to:
 Check # 2737
 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):

James Mahan
642 N Quartermoon Ave
Kuna Id 83634

Phone number (optional):

(208) 922-1899

Signature: Betty Mahan
(signature required)

Printed Name: Betty Mahan

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE
04/02/2004 05:00
CK: 2437 CT: 150010 BH: 737099
1 @ 25.00 = 25.00 ASSUM NAME # 2

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