

CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly. See instructions on reverse.)

(Please type or print legibly. See instructions on reverse.)

FILED/EFFECTIVE



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

APR -2 AM 9: 14

STATE OF IDAHO

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

Second Helpings Catering

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

Name _____

Complete Address

Jeana C Leave11

1474 E 3900 N, Buhl, ID

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

☐ Wholesale Trade☐ Agriculture

☐ Finance, Insurance, and Real Estate

XX Services

Construction

☐ Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-543-4173

Jeana C. Leavell

1474 E 3900 N

Buhl, ID 83316

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

D L Evans Bank

222 Main Ave S

Twin Falls, ID 83301

Signature: _____

Printed Name:

Capacity: Owner

(see instruction # 3 on back of form)

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

1000 SECRETARY OF STATE

04/02/2001 09:00
CK: 965397 CT: 24005 DH: 380537

1 @ 28.00 = 28.00 ASSUM NAME # 2

D 440 69

Revisions 'mit?