



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

2015 JUN 17 AM 9:22

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Rita's Day Cakes

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

<u>Name</u>	<u>Complete Address</u>
<u>Gerardo Ballesteros</u>	<u>80 N. Grant St</u>
<u>Rita Ballesteros</u>	<u>Nampa, ID 83687</u>

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

- | | |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" 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
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Gerardo & Rita Ballesteros
80 N Grant St
Nampa, ID 83687

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

Signature: Rita Ballesteros

Printed Name: _____

Capacity/Title: _____

Signature: X

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE use only

IDAHO SECRETARY OF STATE

06/17/2015 05:00

CK:2089 CT:311072 BH:1480180
1@ 25.00 = 25.00 ASSUM NAME #2

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