



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/ENTERED

2003 FEB 18 AM 10:07

SECRETARY OF STATE
STATE OF IDAHO

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

LA BELLA VITA

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

Rachel Wilson

1151 N. Polk ext.

MOSCOW, ID 83843

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MOSCOW, ID 83843

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

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

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

La Bella Vita (Rachel Wilson)

P.O. box 8084

MOSCOW ID 83843

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):

208 301 1776

Signature: Rachel Wilson
(signature required)

Printed Name: Rachel Wilson

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 07/2002

Secretary of State use only

IDAHO SECRETARY OF STATE
02/18/2003 05:00
CK: 1138 CT: 158010 BH: 663361
1 @ 20.00 = 20.00 ASSUM NAME # 2

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