CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)			
To the SECRETARY OF STATE, STATE OF IDAHO 99 NOV - 8 PM 2: 29 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name TARY OF STATE STATE OF IDAHO			
t 1.	1. The assumed business name which the undersigned use(s) in the transaction of business is:		
	TREASURE VALLEY VE	NDINE	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	Name VEVIN R SMITH	307 PAR	omplete Address WAN WY KUMA 83634
: 	PAUN R SMITH	307 FAR	email by Kung DB3634
			-
 The general type of business transacted under the assumed business name i (mark only those that apply) 			umed business name is:
	Retail Trade	Ğ 🔲 Fi	ransportation and Public Utilities inance, Insurance, and Real Estate lining
4.	The name and address to which future	Phone numb	er (optional):
	TREASURE VALLEY VENDING 307 FARMAN VAY KUNA ID 83634		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	ent	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
			Secretary of State use only
Signature Pont		Revision 2/67	IDAHO SECRETARY OF STATE 11/08/1999 09:00 4: 386 414 963 CT: 122726 BH: 264497
Printed Name: KOVIN R SmiTS		I	1 @ 20.00 = 20.00 ASSUM NAME # 2
Capacity: PR-3106707		corp/formstabr.pm6	D30604
(see instruction # 8 on back of form)		ολφοσί	•