



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

**FILED EFFECTIVE**

2015 DEC 18 AM 9:25

SECRETARY OF STATE  
STATE OF IDAHO

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

Café Cave

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Alexandria Peters

22512 Hollow Lane, Lapwai, ID 83540

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐

Retail Trade

☐

Construction

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Mining

☒

Services

☐

Manufacturing

☐

Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Alexandria Peters

(Name)

PO Box 652

(Address)

Lapwai, ID 83540

(City)

(State)

(Zipcode)

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

Umpqua Bank

(Name)

921 F St

(Address)

Lewiston, ID 83501

(City)

(State)

(Zipcode)

Printed Name: Alexandria Peters

Signature: Alexandria Peters

Printed Name: Alexandria Peters

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

12/18/2015 05:00

CK:1870000367 CT:317996 BH:1504792

10 25.00 = 25.00 ASSUM NAME #2

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