

CERTIFICATE OF ASSUMED BUSINESS NAME

09 MAR -6 AM 8: 34

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

2. The true name(s) and business address(es) of business under the assumed business name: Name Ronatta Rales	317 M	tity or individual(s) doing Complete Address ain Strect O, Idano, 83544	_
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Ronatta's Catery Po Box, 848 Ovatino, Idano 83544 5. Name and address for this acknowledgme copy is (if other than # 4 above):	and Pub		
Signature: RMAHA RAKS (signature required) Printed Name: RONAHA RAKS Capacity/Title: OWNER	g:lcorpyformslabn formslabn.p65 Revised.04/2003	Secretary of State use only IBANO SECRETARY OF STA 03/06/2009 05 CX: 170 CT: 234646 BH: 1 1 0 25.00 = 25.00 ASSUM	TE 1999 160126 HOVE # 2