



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.

2004 FEB 23 AM 9:53

STATE
OF IDAHO

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

ROXY'S on MAIN

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

Name

ROXYS on MAIN

RHONDA OLD

Complete Address

117 MAIN AVE EAST

"

"

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	

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

ROXY'S on main
117 main AVE. EAST
Twin Falls, ID 83301

Submit Certificate of
Assumed Business
Name and \$25.00 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):

212-1552 or 404-1030

Signature: Rhonda Old

(signature required)

Printed Name: Rhonda Old

Capacity/Title: owner/partner

(see instruction # 8 on back of form)

Secretary of State use only

073369

IDANO SECRETARY OF STATE
02/23/2004 05:00
CK: 43642266 CT: 158810 BH: 728785
1 @ 25.00 = 25.00 ASSUM NAME # 2