

Signature:\_\_\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

Filing fee: \$25.00.

2018 MAR 29 AM 8:58

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of business is:  Bite-to-Go  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):  Silver Valley Snack Pak 109 N. Division St., Pinehurst ID 83850					
	Name) Program LLC	(Address)				
	(Name)	(Address)	<u> </u>	<u> </u>		
	(Name)	(Address)				
	(Name)	(Address)				
3.	The general type of busines:  Retail Trade  Wholesale Trade	☐ Transportation and Public Utilities☐ Mining				
4.	⊠ Services  Mailing address for future co	☐ Manufacturing orrespondence:		ce, Insurance, and Re ddress for this acknow than # 4):		
	Christy Jacobs		Michele Groves			
	(Name) 109 N, Division St.		(Name) 17201 S. River Rd.			
	(Address)		(Address)			
	Pinehurst ID 83850 (City) (St	ate) (Zipcode)	Cataldo ID 8	(State)	(Zipcode)	
Printed Name: Michele Groves			Secretary of State use only			
	nature: Muchel H					
Printed Name:			10AHO SECRETARY OF STATE 03/29/2018 05:00			
Signature:			CK:1463 CT:318046 BH:1635270 16 25.00 = 25.00 ASSUM NAME #3			
Printed Name:			D201539			
			1	(Jauly )	•	

Rev. 08/2015