

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

2005.777

		100% (1) A. O. L	
1. The assumed business name which the undersigned use(s) in the transaction of business is:			
Martins	family Mex	ican Restaurant	<u> </u>
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing <u>business under the assumed business name</u> :			
Name	2	Complete Address	
Martin +	Arceo 1	15 N 2nd E Mounta	in In
The general type of business transacted under the assumed business name is:			
Retail Trade Transportation and Public Utilities Wholesale Trade Construction			
Services Manufacturing	AgricultureMining	Submit Certificate of Assumed Business	j
Finance, Insura	ance, and Real Estate	Name and \$25.00 fee to:	
4. The name and address to which future		Secretary of State	I
correspondence should be addressed:		700 West Jefferson	
marlin	Arceo	Basement West	
1116	TYLED	PO Box 83720 Boise ID 83720-0080	
MAD 12 TO 15	Vale Talazaria	208 334-2301	
TATION M. LINCH	HOME 14 70041		
	for this acknowledgment	Phone number (optional):	
CODY is (if other than #4 a	ibove):	587-4044	
		Secretary of State use only	1/

Signature: Practice

Printed Name: May

Capacity/Title:_

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

06/10/2005 05:00

CK: 288263550 CT: 158010 BH: 815268
1 0 25.00 = 25.00 ASSUM NAME # 2

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