

Capacity/Title:

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

164483

## Please type or print legibly. Instructions are included on back of application.

	CENTIFICATE OF	
	ASSUMED BUSINESS	S NAME 20/3.
A STATE OF THE PARTY OF THE PAR	Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed B	he undersigned Business Name
	Please type or print legibly.	560 AM 9.
	Instructions are included on back of app	plication. SATE OF OF SE
1.	The assumed business name which the un	ndersigned use(s) in the transaction of
	business is: San Michele	
	Jan Michele	
2.	The true name(s) and business address(es	s) of the entity or individual(s) doing
	business under the assumed business name	
	Name	Complete Address
	Mickey / hiel	462 E 700 N Firth, ID 83236
3.	The general type of business transacted ur	nder the assumed business name is:
	Retail Trade Transportation	n and Public Utilities
	☐ Wholesale Trade ☐ Construction	
	Services	
	Manufacturing Mining	Submit Certificate of Assumed Business
	Finance, Insurance, and Real Estate	
4.	The name and address to which future	Secretary of State
	correspondence should be addressed:	450 North 4th Street
	Mickey Thiel	PO Box 83720
	462 E 700N	Boise ID 83720-0080 208 334-2301
	Firth, ID 83236	
5.		nt
	COPY IS (if other than # 4 above):	
	ature: Mickey thick	Secretary of State use only
	ed Name: Mickey Thiel	
	ncity/Title: Owner	TRAID SCARFFARM OF ATAME
•	ature:	IDAHO SECRETARY OF STATE  07/15/2013 05:00  CK: 3894 CT: 265294 DV: 1201000
Printed Name:		CK: 3894 CT: 285296 BH: 1381989 1 @ 25.00 = 25.00 ASSUM NAME # 2