

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. 2012 MAR 14 AM 10: 00

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

SECRETARY OF STATE

4. The conversed by simple many which the	STATE OF IDAHO
 The assumed business name which the ubusiness is: 	indersigned use(s) in the transaction of
Two Chicks Na Mou)er
2. The true name(s) and <u>business</u> address(business under the assumed business name Name True True	
3. The general type of business transacted Retail Trade Transportati Wholesale Trade Services Agriculture Manufacturing Mining Finance, Insurance, and Real Esta	on and Public Utilities n Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Tiva Stone 5712 W. Filly St. Boise, ID: 83703	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	ent
	Secretary of State use only
Signature: Time Jone	-
Printed Name: NA Stone	_
Capacity/Title:	- IDAHO SECRETARY OF STATE
Signature:	O3/14/2012 05:00 - CK: 931920 CT: 172099 BH: 1315056
Printed Name:	1 @ 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:	Time

abn.pmd Rev. 07/2010

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