



# 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**

2005 AUG 19 AM 9:11

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

M+M Vending

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

Name

Complete Address

Michael D. Butikafer

P.O. Box 334 Lewisville Id 83431

Margaret M. Butikafer

P.O. Box 334 Lewisville Id 83431

3. The general type of business transacted under the assumed business name is:

- ☒ Bulk candy-vending machines  
☒ Retail Trade ☐ Transportation and Public Utilities  
☐ Wholesale Trade ☐ Construction  
☐ Services ☐ Agriculture  
☐ Manufacturing ☐ Mining  
☐ Finance, Insurance, and Real Estate

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

Michael & Margaret Butikafer  
P.O. Box 334  
Lewisville Id 83431

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):

Same

Phone number (optional):

208-754-4479

Secretary of State use only

Signature:

Margaret Butikafer  
(signature required)

Printed Name:

MARGRET BUTIKAFER

Capacity/Title:

owner/partner

(see instruction #3 on back of form)

g:\ccp\forms\abn form\abn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
08/19/2005 05:00  
CK: 5899 CT: 158010 BH: 987152  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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