

Printed Name: \_\_\_

Capacity/Title: CHEF

/OWNER

(see instruction # 8 on back of form)

## **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.

2006 JAN 17 NH 9:38

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF LYNN

1. The assumed business name which the undersigned use(s) in the transaction of business is:  Syringa Japanese Cafe and Sushi Bar	
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business name:	
Name Vilia Bacca	Complete Address
Viljo Basso \$401	14, 71, 7
<ol><li>The general type of business transacted under the assumed business name is:</li></ol>	
Retail Trade Transportation and Public Utilities	
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Vilio Basso	Basement West
	PO Box 83720 Boise ID 83720-0080
1401 N. 4th St	208 334-2301
Coeur d'Alene, ID 83814	
<ol><li>Name and address for this acknowledgment</li></ol>	Phone number (optional):
COPY is (if other than # 4 above):	208.964.5637
Viljo Basso	
519 E Wallace Ave	Secretary of State use only
Coeurd'Alene, LD 83814	
ignature:	

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IDAHO SECRETARY OF STATE
01/17/2006 05:00
CK: 1937 CT: 158010 BH: 932239
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