

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

2015 MAR 16 PM 4: 36

SECRETARY OF STATE STATE OF IDAHO

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

LOS POF	RTALES NIGHT CLUB		
	name(s) and <u>business</u> address under the assumed business	s(es) of the entity or individual(s) doing name:	
	<u>Name</u>	Complete Address	
JUAN PA	ABLO GARCIA	301 S. 34TH AVENUE	
		CALDWELL, ID 83605	
3. The gene	eral type of business transacte	d under the assumed business name is:	
	• •	ation and Public Utilities	
	nolesale Trade		
Se	rvices 🗌 Agricultur	e	
☐ Ma	nufacturing	Submit Certificate of	
☐ Fir	nance, Insurance, and Real Est	Assumed Business tate Name and \$25.00 fee to:	
4 Thomas	ne and address to which future		
	endence should be addressed:	Secretary of State 450 North 4th Street	
•	BLO GARCIA	PO Box 83720	
4416 SOL	JTH IDAHO AVE	Boise ID 83720-0080	
CALDWE	LL, ID 83607	_ 208 334-2301	
5. Name ar	nd address for this acknowledg	ment	
	f other than # 4 above):		
		_	
		-	
	1 - 113 - S	Secretary of State use only	
ignatur e:	wan follo fineso		
rinted Name:	JUAN PABLO GARCIA	IDAMO SECRETARY OF STATE	
Capacity/Title: OWNER		03/17/2015 05:00	
ignature:		CK:1090 CT:307730 BH:14664 1@ 25.00 = 25.00 ASSUM NAME	
rinted Name:		TO THE PROPERTY OF THE PROPERT	
maeu Name			

abn.pmd Rev. 07/2010

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Capacity/Title: