CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned 10 AM 10: 56 gives notice of adoption of an Assumed Business Name TARY OF STATE 1. The assumed business name which the undersigned us (s) in the transaction of business is: Fired Creptions 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address MY N VINSON BASE II 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities' Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): 203 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080

208 334-2301

Secretary of State use only

IDANO SECRETARY OF STATE

00 ASSLIN MONE # 2

Signature: 1/1/ Capacity:

(see instruction # 8 on back of form)