

Capacity/Title: __

owner

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.

11 JUL 25 AH 9: 05

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

SECRET BY OF STATE STATE OF IDAHO

	Eat, Drink a	and Be Baso	que	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address			
	Jimmy and Michelle Lewis	2462 W. E	2462 W. Blueberry Circle Hayden, ID 83835	
		Hayden, II		
3.	The general type of business transacted u Retail Trade Transportation Wholesale Trade Construction			
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	: :	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4.	The name and address to which future correspondence should be addressed: Eat, Drink and Be Basque	!	Secretary of State 450 North 4th Street PO Box 83720	
	2462 W. Blueberry Circle		Boise ID 83720-0080 208 334-2301	
	Hayden, ID 83835			
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt		
			Secretary of State use only	
gna	iture: Sylh			
inte	ed Name: Jimmy L. Lewis			
ıpa	city/Title: Owner			
gna	iture: MehluMS		IDAHO SECRETARY OF STATE 07/26/2011 05:00	
inte	ed Name: Michelle M. Lewis		CK: 8326 CT: 260961 BH: 128394 1 0 25.00 = 25.00 ASSUN NAME :	

abn.pmd Rev. 07/2010

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