

Printed Name:

Capacity/Title: ()W/VEY

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTSV

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Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: JAVINO'S Cappels 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 TAUINO Manreal 17317 N. Armsted nango 708360 + 17317 N-Armstrad nampt 20 8368 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and **\$25.00** fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** 7317 N. Armstead numpa PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY is (if other than # 4 above): Secretary of State use only P162016

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IDAHO SECRETARY OF STATE 97/21/2006 05:00 CK: CASH CT: 158010 BH: 966190 0 25.00 = 25.00 ASSUM NAME # 2