



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 gives notice of adoption of an Assumed Business Name.

FILED

99 MAR 26 AM 10:07

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

THE PASTO PARTNERS
DBA The Olive Pitt Restaurant

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Lori Wirthlin</u>	<u>638 9th St CLARKSTON WA</u>
<u>Edward J. Wirthlin</u>	<u>638 9th St CLARKSTON WA</u>
<u>Sam & Mark Waddell</u>	<u>3418 14th St LEWISTON ID</u>

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 correspondence should be addressed:

Phone number (optional) 208 750 1131

1303 Main St
Lewiston Id 83501

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature Lori Wirthlin

Printed Name: Lori Wirthlin

Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

03/26/1999 09:00
CK: 2001 CT: 112921 BH: 201818

1 @ 20.00 = 20.00 ASSUM NAME # 2

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