FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2008 MAY 27 AM 11: 24

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

ASHTON SUNRISE CAFE	
The true name(s) and business address(es) of the business under the assumed business name:	ne entity or individual(s) doing
Name	Complete Address
FALL RIVER CAFE, LLC	P.O. BOX 590
(W53246)	1678 WHISPER RIDGE RD
	ASHTON, ID 83420
 ☐ Retail Trade ☐ Wholesale Trade ☐ Construction ☐ Agriculture 	Submit Certificate of
✓ Services	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Idaho Secretary of State 450 N 4th Street
correspondence should be addressed:	PO Box 83720
TODD PHILLIPS	Boise ID 83720-0080
PO BOX 608	(208) 334-2301
BURLEY, ID 83318	
i. Name and address for this acknowledgment copy is (if other than # 4 above):	
	Secretary of State use only
ature. (eigrature required)	80
ed Name: TODD PHILLIPS	
ACCOUNTANT	IDAHO SECRETARY OF STAT
/u/vis/ - 1517	10AHO SECRETARY UF STA 95/27/2008 05

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