



CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

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

MAY -9 PM 2: 09

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:

Bartlik's Villa Pizza

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

Name

Complete Address

John N. Bartlik, Jr.

1485 Poleline Rd.

Shawn L. Bartlik

Twin Falls, ID 83301

Magre Valley Mall

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

4. The name and address to which future correspondence should be addressed:

3485 N 2983 E

Twin Falls, ID 83301

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

Phone number (optional):

736-4907

Secretary of State use only

Signature:

John M. Bartlik, Jr.
Shawn Bartlik

Printed Name:

Shawn Bartlik

Capacity:

owner

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE
05/15/2003 05:00
CK: 1837 CT: 178856 BH: 608882
1 @ 25.00 = 25.00 ASSUM NAME # 2

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