



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED/EFFECTIVE
01 JUL 12 AM 10:19

SECRETARY OF STATE
STATE OF IDAHO

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

NGUYEN'S MONGOLIAN BBQ

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

MONGOLIAN BBQ 6920 W. State St. BOISE, ID 83703
GAM NGUYEN 12153 W. HARVESTER CT BOISE ID
83709

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

- | | |
|--|--|
| <input 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 checked="" 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:

GAM NGUYEN
12153 W. HARVESTER CT
BOISE, ID 83709

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

N/A

Phone number (optional):

323-7039

Signature: GAM

Printed Name: GAM NGUYEN

Capacity: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corpforms\abn form\abn p65
Revised 01/2001

IDAHO SECRETARY OF STATE
07/12/2001 09:00
CK: CASH CI: 148785 BH: 487379
1 @ 20.00 = 20.00 ASSUM NAME # 2

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