



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

06 OCT 25 PM 12: 50

SECRETARY OF STATE
STATE OF IDAHO

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:

FUZZIWIGS CANDY FACTORY

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

<u>Name</u>	<u>Complete Address</u>
<u>KRUPAKAR PONNIK'S TECHNOLOGY</u>	<u>5541 S. FUCHSIA PL</u>
<u>W55661</u>	<u>BOISE - ID 83716</u>

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	

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

Dr. Krupakar Murali
5541 S FUCHSIA PL
Boise ID 83716

Submit Certificate of
Assumed Business
Name and \$25.00 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):

Phone number (optional):

Secretary of State use only

0104977

Signature: Kasthuri
(signature required)

Printed Name: KASTHURI P MUNIRAJAH

Capacity/Title: OWNER

(see instruction # 8 on back of form)