

Printed Name: ___ Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2013 JUN 27 AM 9: 11

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the unders business is: Stop Light Pizza	igned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Tom williamson	the entity or individual(s) doing Complete Address 235 main Ricia 63443
3. The general type of business transacted under Retail Trade	
	Secretary of State use only
Signature:	
Printed Name: Tom will, con Son	
Capacity/Title:	
Signature:	IDAHO SECRETARY OF STATE
Printed Name:	06/27/2013 05:00 CK: 50876396763 CT: 158010 BH: 1379847
O	1 8 25.00 = 25.00 ASSUM NAME # 2

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