

THE THE THE **CERTIFICATE OF**

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

NOTE: See instructions on reverse before filing.

	do's Spaghetti	
The true name(s) and business address(obusiness under the assumed business na		. :
Name	Complete Address	
Aldo Bevilacqua	150 First Street, Idaho Falls, ID 83402	
Geraldine Bevilacqua	150 First Street, Idaho Falls, ID 83402	
	ation and Public Utilities	-0
 Wholesale Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to:	26.4
The name and address to which future correspondence should be addressed: Aldo Bevilacqua	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
743 E 1525 N	(208) 334-2301	
Shelley, ID 83274		
Name and address for this acknowledge copy is (if other than # 4 above):	gment	
	Secretary of State use only	

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