Printed Name: _ Sωπ

Capacity/Title: Pas

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, toaho Code, the undersigned submits for filing a certificate of Assumed Business Name SEP -8 PM 2: 01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

The Cheeseburger Factory	
The true name(s) and business address(es) of business under the assumed business name: Name	the entity or individual(s) doing Complete Address
Finck, Incorporated	143 N. Main St. Victor, Idaho 83455
C 150448	
The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Finck, Inc.	PO Box 83720 Boise ID 83720-0080
143 N. Main St. Victor, Idaho 83455	208 334-2301
	Phone number (optional):
Name and address for this acknowledgment copy is (it other than # 4 above).	

IDAHO SECRETARY OF STATE
09/08/2003 05:00
CK: 157 CT: 158010 BH: 700570
1 8 25.00 = 25.00 ASSUM MANE # 2