



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.

Instructions are included on back of application.

12 PM -3 AM 8:57
SECRETARY OF STATE
STATE OF IDAHO

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

Yesterday's

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

Dev D. Sasser

P.O. Box 1219 BLACKFOOT, IDAHO 83221

Heidi L. Sasser

P.O. Box 1219 BLACKFOOT IDAHO 83221

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 | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Yesterday's
P.O. Box 1219

Attn: Sasser

BLACKFOOT, IDAHO 83221

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

~~P.O. Box~~ Dev D. Sasser

P.O. Box 1219

BLACKFOOT, IDAHO 83221

Signature: [Signature]

Printed Name: DEV D. SASSER

Capacity/Title: Owner

Signature: [Signature]

Printed Name: Heidi L. Sasser

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
05/03/2012 05:00
CK: 283769120544 CT: 158010 BH: 1322679
1 @ 25.00 = 25.00 ASSUM NAME # 2

D155347