

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 MAY -9 AM 10: 36

SECRETARY OF STATE STATE OF IDAHO

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

business is:	
melted cheese mobile eatery	
The true name(s) and <u>business</u> a business under the assumed bus	address(es) of the entity or individual(s) doing siness name:
<u>Name</u>	Complete Address
joseph g. eateries, LLC.	650 E. Butterfield #2B, Weiser, ID 83672
W137656	
3. The general type of business trai	nsacted under the assumed business name is:
_	nsportation and Public Utilities
☐ Wholesale Trade ☐ Cor	nstruction
Services	riculture
Manufacturing Min	ning Submit Certificate of
Finance, Insurance, and Re	Assumed Business eal Estate Name and \$25.00 fee to:
4. The name and address to which	futuro
correspondence should be addre	Secretary of State
Joseph Gams, Managing Member	PO Box 83720
PO Box 192, Cambridge, ID 83610	Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledge.	pwledgment
COPY is (if other than # 4 above):	•
- AM	Secretary of State use only
gnature:	
inted Name: Joseph G. Gams	IDAHO SECRETARY OF STATE
apacity/Title; Managing Member	05/09/2014 05:00
gnature:	CK:1877836 CT:172099 BH:142
inted Name:	14 Z5.UU = Z5.UU ASSUM NAME
apacity/Title;	

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