

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

09 SEP 17 PM 12: 22

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Printed Name: CHRIS DICLMAN

(see instruction #8 on back of form)

Capacity/Title: CO - OWNER

BURRITO BANDI The true name(s) and business address(es	s) of the e	ntity or individual(s) doing	
business under the assumed business nan Name	ne:	Complete Address	
CHRIS DILMAN ROBIN WHITE		2 N FRANKLIN BLVD MPA ID 83687	
3. The general type of business transacted up Retail Trade Transportation Wholesale Trade Construction			
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
I. The name and address to which future correspondence should be addressed: **Burrio Bandinos**		Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
16462 N FRANKLIN BUD NAMPA ID 83687		(208) 334-2301	
 Name and address for this acknowledgme copy is (if other than # 4 above); 	ent		1
		Secretary of State use only	
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IDAHO SECRETARY OF STATE @9/17/2009 05:00 CK: 2815 CT: 240633 BH: 1167471 1 8 25.88 = 25.88 ASSUM MANE N

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