## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504. Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: LIENK AND SMILE" FAMILY RESTAURANT The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name JUDY C. WAITLEY P.O. BOX 488, PIERCE ID 83546 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): 208) 464-2328 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

Signature: Cudu (11) mit

Printed Name:

Capacity:

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

04/01/1999 09:00

CK: 517 CT: 113432 BH: 282984

28.98 = 28.08 ASSUM NAME # 2

x SOK