



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2007 JUN 25 11:04:25

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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

Bandidas' Bar & Grill

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

3 Amigas, LLC

W63704

Complete Address

411 N. Main St.

Hailey, Id 83333

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

3 Amigas, LLC

PO Box 3043

Hailey, ID. 83333

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

208 309-1988

Signature: Susan Weller

(signature required)

Printed Name: Susan Weller

Capacity/Title: Owner/Manager

(see instruction # 8 on back of form)

Form 53-504
Printed 06/20/03

Secretary of State use only

0112489

IDaho SECRETARY OF STATE
06/25/2007 05:00
CK: NO CK # CT: 158010 BH: 1062214
1 e 25.00 = 25.00 ASSUM NAME # 2