

# 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 **APR 16 10 36 AM** gives notice of adoption of an Assumed Business Name. **SECRETARY OF STATE**

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

Midel Enterprises

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

Name	Complete Address
<u>Delsie Peña</u>	<u>518 16th Ave So Nampa, ID</u>
<u>Michael Peña</u>	<u>518 16th Ave So. " "</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Phone number (optional): (208) 467-1982

Delsie Peña  
518 16th Ave So  
Nampa, ID 83651

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Delsie Peña

Printed Name: Delsie Peña

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 04/16/1997  
0900 83521 2  
CK #: 6490 CUST# 79957  
ASSUM NAME 18 20.00= 20.00

# : D