



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2016 JUN 15 PM 12:11

SECRETARY OF STATE
STATE OF IDAHO

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

La Dolce Vita Treats

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Sandra Schreffler PO Box 3834 Nampa ID
(Name) (Address) 83653

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

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

4. Mailing address for future correspondence:

Sandra Schreffler
(Name)

371 N Whitewater park Blvd
(Address)

Boise ID 83702
(City) (State) (Zipcode)

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

(Name)

apt a 302

(Address)

(City) (State) (Zipcode)

Printed Name:

Sandra Schreffler

Signature:

[Signature]

Printed Name:

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

06/15/2016 05:00

CK:107290114470 CT:325691 BH:1533388

1@ 25.00 = 25.00 ASSUM NAME #2

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