

227

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.  
Instructions are included on back of application.

2010 JUL 21 AM 10:43

SECRETARY OF STATE  
STATE OF IDAHO

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

Little Caesars

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

Name  
Bryan Egan  
Heidi Egan

Complete Address  
820 Blue Lakes Blvd North  
Twin Falls, ID 83301

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

Retail Trade  Transportation and Public Utilities

Wholesale Trade  Construction  
 Services  Agriculture  
 Manufacturing  Mining  
 Finance, Insurance, and Real Estate

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

Little Caesars  
P.O. Box 5808  
Twin Falls, ID 83303-5808

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:  
  
 Secretary of State  
450 North 4th Street  
  
 PO Box 83720  
Boise ID 83720-0080  
208 334-2301

5. Name and address for this acknowledgment

copy is (if other than # 4 above):

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

Signature: Bryan Egan  
 Printed Name: Bryan Egan  
 Capacity/Title: Owner  
 Signature: Heidi Egan  
 Printed Name: Heidi Egan  
 Capacity/Title: Owner

Secretary of State use only

07/21/2010 05:00  
 07/21/2010 05:00  
 CK: 488472 CT: 172899 BH: 1231554  
 1 @ 25.00 = 25.00 ASSUM NAME #