

9/21/2012

## **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.

2014 AUG 25 AM 9: 56

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

	Please type or print legibly.  Instructions are included on back of appli	ication.
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	Latte da	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
	<u>Name</u>	Complete Address
	Hayley Olson	32 David Thompson Dr. Bonners Ferry, Idaho 83805
3.		der the assumed business name is: and Public Utilities
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4.	The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street
	P.O. Box 323 Bonners Ferry, Idaho 83805	PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	
		Secretary of State use only
Signa	ature:	
Printed Name: Hayley Olson		IDAHO SECRETARY OF STATE 08/26/2014 05:00
Capa	city/Title: Owner	CK:6800 CT:300468 BH:1438800
Signa	ature: Haylay Olson	16 25.00 = 25.00 ASSUM NAME
rinte	ed Name:	V:
Сара	city/Title:	D173377

abn.pmd Rev. 07/2010