



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 MAR -5 AM 9:38

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

TERI YAKI TIKI

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

Name

Agnes ATTES HIS

Complete Address

1625 5th street

Coeur d'Alene ID

83814

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

<input checked="" 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	

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

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

SAME AS ABOVE

Agnes ATTES HIS

1625 5th Street, C.D.A. ID

Phone number (optional):

(208) 755-5199

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

Signature: 

(signature required)

Printed Name: Agnes ATTES HIS

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Secretary of State use only

Information Form 53-504  
Revised 04/2003

IDAHO SECRETARY OF STATE  
03/05/2007 05:00  
CK: 229 CT: 150010 BH: 1037050  
1 E 25.00 = 25.00 ASSUM NAME # 2

D10887