

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2014 APR 14 AN 10: 09

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

| business under the assumed business name: | The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing | |
|---|---|--|
| | | |
| Name | Complete Address | |
| YUMMYZ FIE (LEARN LLC | POBOX 626 GRANGET ILE FD 835 | |
| (ED Koberstein) | SAME | |
| (W136676) | | |
| The control of business translated under | | |
| The general type of business transacted under | | |
| Retail Trade Transportation an | d Public Utilities | |
| Wholesale Trade Construction | | |
| Services Agriculture | Submit Certificate of | |
| ☐ Manufacturing ☐ Mining | Assumed Business | |
| ☐ Finance, Insurance, and Real Estate | Name and \$25.00 fee to: | |
| The name and address to which future | Secretary of State | |
| correspondence should be addressed: | 450 North 4th Street | |
| | PO Box 83720 | |
| 130 west MAIN STIECT | Boise ID 83720-0080 208 334-2301 | |
| 130 west MAIN STIELL Genneville, ID 83530 | 200 334-2301 | |
| | | |
| Geangeville, ID 83530 | | |
| | | |
| Name and address for this acknowledgment | | |

IDAHO SECRETARY OF STATE

04/14/2014 05:00

CK: 502 CT: 295635 RH: 1420098
1 8 25.00 = 25.00 ASSUM NAME # 3

D170474

Printed Name: _____

Capacity/Title: Owner/ propieter

Signature:

Capacity/Title:__