

CERTIFICATE OF

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CERTIFICATE OF ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersit submits for filing a certificate of Assumed Business Name of Please type or print legibly. Please type or print legibly.	ame.
NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned business is: Fleur du Jour	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the	entity or individual(s) doing Complete Address CE 4400 N Suit ID 83314
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Ms. Denise Peska 1285C E 4400 N Buhl, ID 83316-5123 5. Name and address for this acknowledgment copy is (if other than # 4 above):	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 Phone number (optional):
Signature: Denise W. Teska. Capacity/Title: Dwner (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only