

# CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

APR 3 8 40 AM '97  
STATE OF IDAHO

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

ITALIANNA INN

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

Name	Address
<u>ANNA MARIA ANDERSON</u>	<u>2728 11TH AVE (@ SUNSET PK) LEWISTON, ID</u>
	<u>83501</u>

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

SERVICES (#9)  
See categories on the reverse

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

ANNA, ITALIANNA INN, PO BOX 469 LEWISTON, ID 83501

Signed [Signature]

By ANNA

Capacity OWNER

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 04/03/1997  
0900 79296 2  
CK #: 543 CUST# 79248  
ASSUM NAME 10 20.00= 20.00

Revision 10/96  
q:\corpforms\stabin.pmf

# : D