

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

D155097

12 APR 23 AM 8: 43

SECRETARY OF STATE STATE OF IDAHO

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

Bake	er's Boutique'
 The true name(s) and <u>business</u> address business under the assumed business n <u>Name</u> 	iame: Complete Address
Lisa Oakes	152 S. 450 E. Burley, Idaho 83318
B. The general type of business transacted Retail Trade Transportat Wholesale Trade Services Manufacturing Mining	son and Public Utilities Submit Certificate of
Finance, Insurance, and Real Esta	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Baker's Boutique' C/O Lisa Oakes	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
152 S. 450 E. Burley, Idaho 83318	208 334-2301
5. Name and address for this acknowledge copy is (if other than # 4 above):	nent
	Secretary of State use only
nature Sina Jake	_
nted Name: Lisa Oakes	-
pacity/Title: Owner nature:	
nted Name:	
apacity/Title:	1 0 25.00 = 25.00 ASSUM NAME

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