

## **CERTIFICATE OF** ASSUMED BUSINESS NAMEFILED/EFFECTIVE Pursuant to Section 53-504, Idaho Code, the undersigned O2 SEP 20 PM 2: 40

1

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

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF IDAHO

The assumed business name which the undersolution business is:      Chocolate Etc	signed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  Eva Castle Goodman 129	Complete Address
The general type of business transacted under	
Retail Trade Transportation ar	nd Public Utilities
<ul> <li>☐ Wholesale Trade</li> <li>☐ Construction</li> <li>☐ Agriculture</li> <li>☐ Manufacturing</li> <li>☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  Eva Castle Goodman  12426 W.Edna Dr.  Boise ID 83713-1951	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208)672-9516
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE  OP/20/2002 05:00  CK: 5186 CT: 158818 BH: 489458 1 @ 20.00 = 20.00 ASSUM NAME # 6