

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

	FILED EFFECT	IVE
CERTIFICATE OF  ASSUMED BUSINESS NAM  Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business National Please type or print legibly.  Instructions are included on back of application.	E STAPA	0. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
1. The assumed business name which the undersigned use(s) in the transaction of business is:  OUAIL RIMON CAFE		
2. The true name(s) and business address(es) of the element business under the assumed business name:  Name  NAME	ntity or individual(s) doing  Complete Address  1105 W. UALLE 11465KMAN, I	LIRIO DE LA CONTRACTION DE LA
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		
4. The name and address to which future correspondence should be addressed:  KICHARD E. DIAHL  (65 W. VALLEY R.D.  HAGERINAN, IN 83333	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment copy is (frother than # 4 above):	Secretary of State use only	
Signature:    Land		
Signature:	IDAHO SECRETARY OF STATE  04/26/2012 05:00  CK: 19279232605 CT: 269737 BH: 1321494	
Printed Name:	1 0 25.08 = 25.00 ASS	NAME # 2
Capacity/Title:	_4	

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