

Capacity/Title: 6 When

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned



Please type or print legibly. NOTE: See instructions on reverse before filing.	ame. STATE OF DAHOTE	
The Smoke Shack The S	d use(s) in the transaction of	
The true name(s) and business address(es) of the elements business under the assumed business name: Name	Complete Address	
Timothy L. Miner 1304 Penny L. Miner 631 F	531 Broadway 5 Buhl ID Broadway 5. Buhl Idaho 83316	833/4
3. The general type of business transacted under the a Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720	
5. Name and address for this acknowledgment	Boise ID 83720-0080 208 334-2301 Phone number (optional):	
copy is (if other than #4 above): 631 Broad Way 5 Bull ID	208-343-5588	
Signature: 4 DENNY Mines EXCEPTION OF PRINTING TO PRIN	Secretary of State use only IDAHO SECRETARY OF STATE	

IDAHO SECRETARY OF STATE 96/27/2003 95:00 CK: 8661 CT: 158810 BH: 688383 1 0 25.00 = 25.00 ASSUM NAME # 2

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