



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

2012 JUL 16 AM 9:51

SECRETARY OF STATE
STATE OF IDAHO

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

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

Doh!Nuts!

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

<u>Name</u>	<u>Complete Address</u>
<u>Derek Chesley</u>	<u>414 Monroe St, Kimberly ID 83341</u>
<u>Staci DeLeon</u>	<u>414 Monroe St, Kimberly ID 83341</u>

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Derek Chesley
PO Box 137
Hansen, ID 83334

5. Name and address for this acknowledgment copy is (if other than # 4 above):
- _____

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: [Signature]

Printed Name: Derek Chesley

Capacity/Title: owner

Signature: [Signature]

Printed Name: Staci DeLeon

Capacity/Title: -Partner

Secretary of State use only

IDAHO SECRETARY OF STATE
07/16/2012 05:00
CK: 2286 CT: 272383 BH: 1332048
1 @ 25.00 = 25.00 ASSUM NAME # 2

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