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CERTIFICATE OF ASSUMED BUSINESS I Pursuant to Section 53-504, Idaho Code, the u submits for filing a certificate of Assumed Bus <u>Please type or print legibly.</u> Instructions are included on back of applic 1. The assumed business name which the under business is: <u>The Groom Room</u>	undersigned iness Name, SECRETARY OF STATE STATE OF IDAHO atton.
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name <u>Name</u> <u>Shakon M Jacobsen</u>	of the entity or individual(s) doing Complete Address ZIS-B W. Meple, Postello T. 183201
 3. The general type of business transacted under Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Shacon JAcob sen 215-B W. Maple 5. Name and address for this acknowledgment copy is (if other than # 4 above): 	er the assumed business name is: nd Public Utilities 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: <u>Jlawn M. Jacobsen</u> Printed Name: <u>Shacon M. Jacobsen</u> Capacity/Title: <u>Ownerc</u> Signature: Printed Name: Capacity/Title:	Secretary of State use only IDAHO SECRETARY OF STATE 34/04/2014 05:00 CK: 1790754 CT: 172099 BH: 1418772 1 8 25.00 = 25.00 ASSUM NAME # 2
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