

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIVE

SECRETARY OF STATE OF DALLS

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.

The assumed business name which the under business is:	ersigned use(s) in the transaction of
LA HUNGARITA'S BOTANICA	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Maria (a Espinaza	
3. The general type of business transacted und  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:  ARCHOST TO 88221  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 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature: Main Change	IDAHO SECRETARY OF STATE  ##################################
Printed Name: Maria ESPINOZA	IDAHO SECRETARY OF STATE  9 9 05/23/2007 05 = 00  CK: 2852 CT: 213655 BH: 100MC # 2
Capacity/Title: <u>Dw ner 100 %</u>	1 25.00 = 25.00 ASSUM NAME # 3