9/21/2012

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFERTIVE

SUSTATE OF IDAHO

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

1. The assumed business name which the under business is: Loth CEONE COFFEE House	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Lisa A. Johnston	
Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 525 Ceone St. ☐ 83803	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
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Secretary of State use only
Signature: And Defendant Printed Name: Lisa A. Johnston Capacity/Title: OWNER Signature: Printed Name: Capacity/Title: Capacity/Title:	IDAHO SECRETARY OF STATE 07/29/2015 05:00 CK:3071396 CT:172099 BH:1485891 16 25.00 = 25.00 ASSUM NAME #2