

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

2018 MAY -4 AM 9: 12

| 1. | SECRETARY OF STATE The assumed business name which the undersigned use(s) in the transaction of business is: El Savor De Puerto Rico y Mexico | | | | |
|---------------|---|---|-------------|---------|--|
| | | | | | |
| | 2. | The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1): | | | |
| | Tamara Cruz Bulgos | 275 W Oak Street #25 Shelley Idaho 83274 | | | |
| | (Name) | (Address) | | | |
| | (Name) | (Address) | | | |
| | (Name) | (Address) | | | |
| | (Name) | (Address) | | <u></u> | |
| 3. | The general type of business transacted under the assumed business name is: | | | | |
| | Retail Trade | Construction | 1 | _ | ansportation and Public Utilities |
| | | ☐ Agriculture ☐ Manufacturii | na | = | lining nance, Insurance, and Real Estate |
| 4. | Mailing address for future Tamara Cruz Bulgos (Name) 275 W Oak Street #25 (Address) | correspondence: | 5. | | nd address for this acknowledgment f other than # 4): |
| | Shelley , Idaho 83274 | | | , | |
| | (City) | (State) (Zipcode) | | (City) | (State) (Zipcode) |
| Pri | inted Name: AMAR | ACTUZB. | | | Secretary of State use only |
| Sig | gnature: Tomara | <u>e, B.</u> | | | |
| Printed Name: | | | | | IDAMO SECRETARY OF STATE 05/04/2018 05:00 |
| Signature: | | | | | C:340387 CT:357298 BH:1642021 P 25.00 = 25.00 ASSUM NAME #2 |
| Pri | Printed Name: | | | | D 202414 |
| Sid | nnature: | |] | | |

Rev. 08/2015