

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## FILED EFFECTIVE

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

Filing fee: \$25.00.

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	Filing fee: \$2	25.00.	SECRETARY OF STATE
1.	. The assumed business name which the undersigned		ed use(s) in the transaction of business is:
	Sasparilly's		
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):		
	Brenda Chioino	2219 S 10th Ave Ca	ldwell, Idaho 83605
	(Name)	(Address)	
	(Name)	(Address)	<del></del>
	(Name)	(Address)	
	(Name)	(Address)	
3.	The general type of bus	iness transacted under the	assumed business name is:
	<ul><li>Retail Trade</li><li>Wholesale Trade</li><li>Services</li></ul>	Construction Agriculture Manufacturing	<ul><li>Transportation and Public Utilities</li><li>Mining</li><li>Finance, Insurance, and Real Estate</li></ul>
4.	Mailing address for future Brenda Chioino (Name) 2219 S 10th Ave (Address) Caldwell, Idaho 83605 (City)	re correspondence:  (State) (Zipcode)	5. Name and address for this acknowledgment copy is (if other than #4):  Brenda Chlomo (Name)  2219 S. 10th Ave (Address) (City) (State) (Zipcode)
Printed Name: Brenda Chioino			Secretary of State use only
Sig	gnature: \(\sum_{\text{M}}\text{O}()	nO	
Pr	inted Name:		INIVA SECREMINU OF SMIMP
Signature:			10AHO SECRETARY OF STATE 06/18/2018 05:00
Printed Name:			CK:389 CT:158010 BH:1649584 10 25.00 = 25.00 ASSUM NAME #2
Sig	jnature:		
		Rev. 08/2015	D 203481