



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

03 APR 18 AM 11:03
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Java-n-Smoothie Delights

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Patricia Chandler</u>	<u>3429 E Emory Ave</u>
	<u>Nampa, Id 83686</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Patricia Chandler
3429 E. Emory Ave
Nampa, Id 83686

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

same

Phone number (optional):

466-6219

Signature: Patricia Chandler

(signature required)

Printed Name: Patricia Chandler

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

064516

IDAHO SECRETARY OF STATE
04/18/2003 05:00
CK: 2985 CT: 158018 BH: 675588
1 @ 25.00 = 25.00 ASSUM NAME # 2