

227



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.

FILED EFFECTIVE

8:39

STATE
IDAHO

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

Yomama

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

Name

Complete Address

CHRISTINE LOHMAN

30627 Chute Rd

PAM JOHNSON DIBBINS

Kendrick ID 83537

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

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

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

30627 Chute Rd

Kendrick ID #3537

**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):

Phone number (optional):

208-289-3401

Secretary of State use only

Signature: Christina Moore
(signature required)

Printed Name: Christine Lehman

Capacity/Title: Owner

(see instruction # 8 on back of form)

5307 University Blvd. North, Suite 100, Jacksonville, FL 32217
 Phone: 904/451-1234

IDAHO SECRETARY OF STATE
07/22/2004 05:00
CK: 2 CT: 158010 BH: 756928
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 78498