

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

## Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## FILED EFFECTIVE

2013 SEP 16 AM 9: 36

SECRETARY OF STATE STATE OF DAHO

The true name(s) and business address(es) of the entity or individual(s) doing usiness under the assumed business name:    Name	Lewiston Pizza Perfection	
Name   247 Thain Rd Suite 101, Lewiston, ID 83501	The true name(s) and <u>business</u> address(es	, , ,
me general type of business transacted under the assumed business name is:  Retail Trade	- 1, - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
Retail Trade	KB&C Enterprises LLC	247 Thain Rd Suite 101, Lewiston, ID 83501
Retail Trade	W128618	
208 334-2301	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 450 North 4th Street PO Box 83720
	Name and address for this acknowledgme copy is (if other than #4 above):	nt
ame and address for this acknowledgment  ppy is (if other than #4 above):		Secretary of State use only
DPY is (if other than #4 above):	ature: //// ///////	
Opy is (if other than #4 above):  Secretary of State use only	ted Name: Kent Nichols	
Secretary of State use only	acity/Title: Manager	
Secretary of State use only  Name: Kent Nichols	nature:	IDAHO SECRETARY OF STO 09/16/2013 05
Secretary of State use only  Name: Kent Nichols  y/Title: Manager  IDAHO SECRETARY OF ST	ted Name:	CK: 542869 CT: 287564 BH:

abn.pmd Rev. 07/2010

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Capacity/Title: