

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 filling.

FILED/EFFECTIVE

2002 AUG 15 PM 2:05

STATE OF IDAHO

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

SWEET DREAMS ~~VENTURE~~ CANDY SALES

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

GREGGORY MILLER

855B S. 3rd POCAHELLO, ID 83201

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 | |
- Submit
 Assume
 Name a

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:

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

GREGGORY MILLER

8558 S 3rd #

POCATELLO, ID 83201

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) 475-7581

Secretary of State use only

Signature:

Robert M. Lee

(signature required)

Printed Name:

GREGGORY MILLER

Capacity/Title: OWNER

(see instruction # 8 on back of form)

Revised: 07/2002

IDAHO SECRETARY OF STATE
 08/15/2002 05:00
 CK: 1000 CT: 150018 BH: 482991
 1 @ 20.00 = 20.00 ASSUM NAME # 2

D 57394