



CERTIFICATE OF ASSUMED BUSINESS NAME **FILED EFFECTIVE**

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

APR 19 AM 8:38

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

RENEE'S

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

RENEE JONES
775 N. Yellowstone
IDAHO FALLS, IDAHO 83402

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☒ Services (Food) | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

RENEE'S
620 EAST COACHMAN CIRCLE
IDAHO FALLS, IDAHO 83402

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):

Bank of IDAHO
399 N. Capitol Ave
Idaho Falls, ID 83402

Phone number (optional):

(208) 524-5500

Signature: *Renee Jones*

(signature required)

Printed Name: RENEE JONES

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
04/19/2007 05:00
CK: 38416 CT: 158010 BH: 1048329
1 @ 25.00 = 25.00 ASSUM NAME # 2

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