



# 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.

08 MAY -7 AM 8:14

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:

Twisted Pastries

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

Personal Sous Chef LLC  
(6067720)

995 E Leighfield Dr. Meridian Id 83646

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

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

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

208 334-2301

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

995 E Leighfield Drive  
Meridian Id 83646

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

Signature: Katherine Lowe

(signature required)

Printed Name: Katherine Lowe

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE  
05/07/2008 05:00  
CK: 2021 CT: 225733 BH: 1113854  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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