



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

08 OCT -7 AM 8:22

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:

Miss Mady's Sweet Treats

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

Rosa E Crance

12083 W Rader Dr, Boise, ID 83713

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:

Miss Mady's Sweet Treats

12083 W Rader Dr

Boise, ID 83713

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

Signature: _____

Rosa Crance
(signature required)

Printed Name: _____

Rosa Crance

Capacity/Title: _____

Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corplformation\formation.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
10/07/2008 05:00
CK: 159775 CT: 172099 BH: 1139131
1 @ 25.00 = 25.00 ASSUM NAME # 2

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