



CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAR -8 AM 8:04

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Rocco & Andy's Snack Shop

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

| <u>Name</u> | <u>Complete Address</u> |
|----------------------|------------------------------|
| <u>Heriberto Paz</u> | <u>353 S. Delphinium Ave</u> |
| <u>Dina Paz</u> | <u>STAR, Idaho 83469</u> |

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 | |

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

Heriberto & Dina Paz
353 S. Delphinium Ave
Star, Idaho 83469

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

Same as above

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: [Signature]
Printed Name: Heriberto Paz
Capacity/Title: _____
Signature: [Signature]
Printed Name: Dina Paz
Capacity/Title: OWNER

IDAHO SECRETARY OF STATE
03/08/2011 05:00
CX: 203107331306 CT: 150010 BH: 1263254
1 @ 25.00 = 25.00 ASSUM NAME # 2

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