

Capacity/Title:_(

(see instruction # 8 on back of form)

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

3: 55 PA 3: 55

Please type or print legibly. NOTE: See instructions on reverse before filing.

STATE OF IDAHO

D83859

1. The assumed business name which the undersigned business is: Cur (Sid ε Cafe) 1	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name ON AH A-WOSHLEL 476	Complete Address
The general type of business transacted under the Retail Trade Transportation and Pu	
 Wholesale Trade ☐ Construction Services ☐ Agriculture Manufacturing ☐ Mining Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: ON AHA A UDEHLEY 4969 HAMS STREET GAYSEN CITY FLANO 83714	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
Signature: Signature required Name: DONALO: A: WEHLEL	IDAHO SECRETARY OF STATE 01/28/2005 05 m 00 CK: CASH CT: 158010 BH: 78999A