

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

## Please type or print legibly. Instructions are included on back of application.

## FILED EFFECTIVE

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STATE OF IDAHO

1.	business is:	ssumed business name which the undersigned use(s) in the transaction of ss is:  Celestial Bakery	
	Celesti	al bakery	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address		
	Ann Anduha Diaz	122 Holly St Nampa Idaho 83686	
3.	The general type of business transacted ur		
	<ul><li>✓ Retail Trade</li><li>✓ Transportation</li><li>✓ Wholesale Trade</li><li>✓ Construction</li></ul>	n and Public Utilities	
	Services Agriculture Manufacturing Mining	Submit Certificate of Assumed Business	
	Finance, Insurance, and Real Estate	Name and \$25.00 fee to:	
4.	The name and address to which future correspondence should be addressed:	Secretary of State 450 North 4th Street PO Box 83720	
	1201 W Teton Ave Nampa Idaho 83686	Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	nt ·	
		Secretary of State use only	
Signa	ed Name: ANN C. ANOUHA DIAZ		
Capacity/Title: <u>DWNER</u> Signature:		1DAHU SECRETARY OF STATE  03/23/2012 05:00  CK: 941971 CT: 172899 BH: 1316785	
	ed Name:	1 0 25.00 = 25.00 ASSUM NAME # 2	
Capa	acity/Title:	1 7154294	
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