

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 JUN 18 AM 11: 09

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the un	ndersigned use(s) in the transaction of	
business is: Best Valley	Parton	
The true name(s) and business address(es business under the assumed business name and the second secon		ŧ
Name Francisco Tavier Mateos	Complete Address 8144 & Sug River	<u>.</u>
	Nampa 20 83687	
3. The general type of business transacted un	nder the assumed business name is:	
Retail Trade Transportation Wholesale Trade Construction	n and Public Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business	
4. The name and address to which future correspondence should be addressed: Faucisco Tavier Mateos	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	
" Same as above"	(208) 334-2301	
Name and address for this acknowledgme	ent ent	*
COPy is (if other than # 4 above):		
	Secretary of State use only	:
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gnature: Satura (signature required)	22003 2003	
ignature: Astro (Signature required) rinted Name: Faucis a Favier Mates	IDAHO SECRETARY OF STA ### CASH C7: 158916 PH; 1: 1 8 25.60 = 25.66 CURREL	TE B CB CB