

FILED EFFECTIVE

2004 NOV 18 PM 1:30

SECRETARY OF STATE OF IDAHO



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.

NOTE: See instructions on reverse before filing.

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

Havana Hearts Company

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

Name

Michael Mongelli

Karen Mongelli

Complete Address

909 N. Caracaras Place, Eagle, Idaho 83616

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3. The general type of business transacted under the assumed business name is:

☒ Retail Trade

☒ Wholesale Trade

☐ Services

☒ Manufacturing

☐ Finance, Insurance, and Real Estate

☐ Transportation and Public Utilities

☐ Construction

☐ Agriculture

☐ Mining

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

Michael Mongelli

909 N. Caracaras Place, Eagle, Idaho 83616

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

208-938-9861

Secretary of State use only

Signature: _____

(signature required)

Printed Name: MICHAEL MONGELLI

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

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11/18/2004 05:00
CK: 11181150651KAH CT: 172099 BH: 777384
1 @ 25.00 = 25.00 ASSUM NAME # 2