



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

99 MAR 29 PM 2:09
SECRETARY OF STATE
STATE OF IDAHO

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

LIBRERIA CATOLICA EL PESCADOR

- The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>MARIA DALILA AMBROGIO</u>	<u>146 9th. St. IDAHO FALLS, ID. 83404</u>
_____	_____
_____	_____

- The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

Phone number (optional): (208) 528-9258

146 9th. St.
IDAHO FALLS, ID 83404

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

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

Signature: *M. Ambrosio*

Printed Name: MARIA DALILA AMBROGIO

Capacity: _____

(see instruction # 8 on back of form)

Revision 1/88

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Secretary of State use only
IDAHO SECRETARY OF STATE
04/08/1999 09:00
CX: 2620150777 CT: 113790 BH: 205339
1 @ 20.00 = 20.00 ASSUM NAME # 2

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