



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 NOV -3 AM 8:48

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

SECRETARY OF STATE
STATE OF IDAHO

The Backroads Diner

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Daniel Chmiel 18 N. Main Street Kooskia ID 83539
(Name) (Address)

Alexis Greene 18 N. Main Street Kooskia ID 83539
(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

Daniel Chmiel
(Name)
1036 Clear Creek Rd
(Address)
Kooskia Idaho 83539
(City) (State) (Zipcode)

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

(Name)
(Address)
(City) (State) (Zipcode)

Printed Name: Daniel Chmiel

Signature: [Signature]

Printed Name: Alexis Greene

Signature: [Signature]

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/03/2015 05:00

CK: 88210 CT: 316384 BH: 1498978
1@ 25.00 = 25.00 ASSUM NAME #2

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