



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2017 MAR 17 AM 9:17

SECRETARY OF STATE
STATE OF IDAHO

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

Snake River Travel Plaza

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):

KWD, LLC 320 W. Highway 20 Blackfoot, ID 83221
(Name) (Address)
W179453

(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:

Snake River Travel Plaza
(Name)
PO Box 456
(Address)
Blackfoot, ID 83221
(City) (State) (Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Michelle KatzeanesSignature: Michelle Katzeanes

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/17/2017 05:00

CK:2318 CT:336355 BH:1574254
16 25.00 = 25.00 ASSUM NAME #2

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