



CERTIFICATE OF ASSUMED BUSINESS NAME FILED/EFFECTIVE

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.

01 JUL 31 PM 3:04

SECRETARY OF STATE
STATE OF IDAHO

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

Backroad Enterprises

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

Name	Complete Address
<u>Deb Wilper</u>	<u>P.O. Box 12</u>
<u></u>	<u>Eagle, ID 83616</u>
<u></u>	<u></u>

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

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

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

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

Deb Wilper
P.O. Box 1291
Eagle, ID 83616

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

Deb Wilper
663 E. State B202
Eagle, ID 83616

Phone number (optional):
(208) 938-9204

Signature: Deb Wilper

Printed Name: Deb Wilper

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE
07/31/2001 05:00
CR: 6172 CT: 149512 BH: 410908
1 @ 20.00 = 20.00 ASSUM NAME # 2

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