



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 JUN 11 AM 9:25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

Back Room Grill

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
Marcee Kaye Hammeren	183 Prichard Street, Lot 1 Wallace, Idaho 83873

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

<input checked="" 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	

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

Back Room Grill or Marcee Hammeren

183 Prichard Street Lot 1

Wallace, Idaho 83873

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Secretary of State use only

Signature: Marcee Hammeren
(Signature required)

Printed Name: Marcee K. Hammeren

Capacity/Title: Owner

(see instruction # 8 on back of form)

Form 56
Rev. 10/2008

IDaho SECRETARY OF STATE
06/11/2010 05:00
CK: 2981 CT: 158818 BH: 1226225
1 @ 25.00 = 25.00 ASSUM NAME #

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