



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned **2006 JUN 30 PM 3:18**
submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

The Backyard

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

Frozen Custard Inc. 115 S 2nd W Rexburg ID 83440
C 165019

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate

Submit Certificate of
Assumed Business
Name and \$25.00 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:

MAX B. CLEMENTS
115 S. 2ND W.
Rexburg ID 83440

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

Phone number (optional):

Signature: Max B. Clements

(signature required)

Printed Name: MAX B. CLEMENTS

Capacity/Title: President

(see instruction # 8 on back of form)

Secretary of State Use only

001431

IDAHO SECRETARY OF STATE
06/30/2006 05:00
CK: 846437 CT: 172099 BH: 963852
1 @ 25.00 = 25.00 ASSUM NAME # 2

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Revised 04/2003