



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

RESET FORM
FILED EFFECTIVE

2017 APR 24 AM 10:46

SECRETARY OF STATE
STATE OF IDAHO

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

CJS Tire Chains

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):

Calvin Dyck 1523 Oxford Rd Bonners Ferry, ID 83805
(Name) (Address)

Jessica Dyck 1523 Oxford Rd Bonners Ferry, ID 83805
(Name) (Address)

(Name) (Address)

(Name) (Address)

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

☒ Retail Trade
☐ Wholesale Trade
☐ Services

☐ Construction
☐ Agriculture
☐ Manufacturing

☐ Transportation and Public Utilities
☐ Mining
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Calvin Dyck
(Name)
1523 Oxford Rd
(Address)
Bonners Ferry ID 83805
(City) (State) (Zipcode)

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

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: Calvin Dyck

Signature: Calvin Dyck

Printed Name: Jessica Dyck

Signature: Jessica Dyck

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/24/2017 05:00

CK: 517 CT: 158010 BH: 1580605
10 25.00 = 25.00 ASSUM NAME #2

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