

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 AUG 16 AM 9: 13

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned use(s) in the transaction of business is: SNAKE RIVER CONCESSIONS	
2. The true name(s) and <u>business</u> address business under the assumed business r Name BECKY KEENAN	
B. The general type of business transacted Retail Trade Transportat Wholesale Trade Services Agriculture	tion and Public Utilities on
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Esta	Submit Certificate of Assumed Business Assumed \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: SNAKE RIVER CONCESSIONS 3722 N. 4300 E. HANSEN, ID 83334	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgr copy is (if other than # 4 above):	ment
nature: Blokey Klenan nted Name: BECKY KEENAN	Secretary of State use only
pacity/Title: OWNER nature:	

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