



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

DEC -8 AM 9:42

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:

B Bar B Wholesale

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

Jeffrey D. Schild

719 W Pacific Blackfoot Id

Shawn D. Schild

719 W Pacific Blackfoot Id 8322

Kelly D. Schild

719 W Pacific Blackfoot Id 83221

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

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

B Bar B Wholesale

719 W Pacific

Blackfoot Id 83221

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

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

Phone number (optional):

208-785-1731

Signature: _____

(signature required)

Printed Name: Kelly D. Schild

Capacity/Title: Partner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
12/08/2008 05:00
CK: 11918186 CT: 93247 DH: 1147325
1 @ 25.00 = 25.00 ASSUM NAME # 2

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