D 62008



## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.	•
The true name(s) and business address(es) of the business under the assumed business name:	Nater Center of N.W entity or individual(s) doing
Name	Complete Address
Northwest Rainbow, Inc. 59 (C-135444) Pos	00 W. Seltice Way #4 st Falls ID 83854
3. The general type of business transacted under the	assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
Post Falls ID 83854	
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above).</li> </ol>	Phone number (optional):
	Secretary of State use only
Signature: Name: Mohsen Rigi  Capacity/Title: President  Capacity/Title: President	IDAHO SECRETARY OF STATE ②1/31/2003 ②5 = ②2 CK: 3157 CT: 135565 BH: 660319 1 @ 20.00 = 20.00 ASSUM MANE
(see instruction # 8 on back of form)	