Printed Name:

Capacity: numera

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Bus	*
The assumed business name which the undersigned to business is:      NORSE Legacy	•
2. The true name(s) and business address(es) of the ent business under the assumed business name is/are:  Name  Cro Karlsen Puetr 10755 business C. Puetr 10755 business C. Puetr 10755 business C.	Complete Address  O. TREELINE CT
3. The general type of business transacted under the ass (mark only those that apply)    Retail Trade	
correspondence should be addressed:  Tames C+ GRO K, PUETT  10755 W. TREELINE CT  Boise FD 83713	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
LA ZO A A A A A A A A A A A A A A A A A A	Secretary of State use only  IDAHO SECRETARY OF STATE

09/22/2006 09:00 CX: 1833 CT: 136361 BH: 358126

1 0 20.00 = 20.00 ASSUM NAME # 2

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