



# 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 undersigned gives notice of adoption of an Assumed Business Name.

MAY 5

FILED  
10 25 AM '98

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

N. H. S. LABS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

DWAYNE STRAWN

Complete Address

2490 BRIDGEMAN CT.

Eagle ID 83616

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☒

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☐

Services

☐

Construction

☐

Mining

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

Phone number (optional): 800 991-4805

DWAYNE STRAWN

2490 BRIDGEMAN CT.

Eagle ID. 83616

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: Dwayne C Strawn

Printed Name: DWAYNE C STRAWN

Capacity: \_\_\_\_\_

(see instruction # 8 on back of form)

Revision 1/98

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Secretary of State use only

IDAHO SECRETARY OF STATE

05/05/1998 09:00

CK: 555 CT: 98233 BH: 107657

1 @ 20.00 = 20.00 ASSUM NAME

#14647