



# 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.**

2007-2 AM 9/6  
**FILED EFFECTIVE**

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

NC TAPING

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

Name

OSCAR ZIRATE-VELASQUEZ

Complete Address

1819 W HAVENWOOD NAMPA, ID 83651

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input checked="" type="checkbox"/> Construction
<input type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

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

NC TAPING

1819 W HAVENWOOD

NAMPA, ID 83651

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

Phone number (optional):

208-407-9639

Secretary of State use only

Signature: Oscar Zirate

(signature required)

Printed Name: OSCAR ZIRATE-VELASQUEZ

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE  
03/02/2006 05:00  
CK: 1231 CT: 192263 BH: 948641  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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