

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

08 JUL -7 AM 9:51 SECRETARY OF STATE STATE OF IDAHO

The state of the s

Please type or print legibly. NOTE: See instructions on reverse before filing.

<ol> <li>The assumed business name which the business is:</li> </ol>	e undersigned use(s) in the transaction of
Nicklas Constructio	h
2. The true name(s) and business addres business under the assumed business Name  Christian Manuelle Nicklas	s(es) of the entity or individual(s) doing name:  Complete Address  222 E. Remington RD.  A+hol ID. 8380
3. The general type of business transacted Retail Trade Transporta Wholesale Trade Construct	ation and Public Utilities
Services Agricultur  Manufacturing Mining  Finance, Insurance, and Real Est	e Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:  222 E. Remington RD	
5. Name and address for this acknowledge copy is (if other than # 4 above):	(208) 334-2301 gment
	Secretary of State use only
Signature: Missignature required)	1DAHO SECRETARY OF STATE  17/07/2008 05:00  CK: 1786 CT: 158010 BH: 1125804
Printed Name: Christian Nicklas	LIDAHO SECRETARY OF STATE
Capacity/Title: <u>クいいとい。</u> (see instruction # 8 on back of form)	### ##################################