

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2016 JUL 22 AM 9 57 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

The assumed business name which the under business is: NG Construction	rsigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Raquel Gonzalez Martinez	Complete Address
3. The general type of business transacted unde Retail Trade Transportation ar Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: P.O. Box 371 AmoriCan Falls ID 83211	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	
Signature: Raquel Gonzalez. Printed Name: Raquel Gonzalez	Secretary of State use only IDAHO SECRETARY OF STATE 07/22/2016 05:00
Printed Name: Kaguel GunzallZ Capacity/Title: Signature:	CK:CASH CT:327068 BH:1538762 1@ 25.00 = 25.00 ASSUM NAME #2
Printed Name:	Dicco
Capacity/Title:	U 188093

abn.pmd Rev. 07/2010