

Capacity/Title: <u>\tag{}\</u>

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 NOV -3 PM 12: 46 SECRETARY OF STATE STATE OF IDAHO

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

NS Enterprises	
2. The true name(s) and business address(es) of the business under the assumed business name: Name NICOLE A Spauding 39	e entity or individual(s) doing Complete Address 85 W Teky Sheet Endian Id 83(allo
Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: NCOK A SPANIONA SASS W TELEY STREET MENDION TO 830440	
nature: Name: NICOR A Sparkary	Secretary of State use only IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE
11/03/2008 05:00
CK: 6051869 CT: 158610 BH: 1142884
1 0 25.00 = 25.00 ASSUM NAME # 2

