Capacity: Own is

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly. See instructions on re-To the SECRETARY OF STATE, STATE OF IDAHOR Pursuant to Section 53-504, Idaho Code, the undersigned 19 411 100 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: NEL MAR 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Nellie Yundt 10556 Southerland Dr. Boise-09 12080 Florida Dr. Boise -83167 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 Phone number (optional): _ 4. The name and address to which future correspondence should be addressed: Southerland Dr. Submit Certificate of Assumed Business Name and \$20.00 fee to: Vellie Yund+ Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 / Boise ID 83720#0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 02/18/2000 09:00 CK: 1782 CT: 126959 BH: 291549 Signature: / lette 1 @ 20.00 = 20.00 ASSLM NAME # 2 Printed Name: NELLI

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