FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

10 AUG 16 PM 3: 06

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

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before	e filing.
1. The assumed business name which the und business is:	ersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name ORONG M. Nic/Son Anne He Nic/Son	
3. The general type of business transacted und Retail Trade Transportation of Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: **Craig Annetic Nicker** **Craig Annetic Nicker** **Meridian Ida F3/42** 5. Name and address for this acknowledgment copy is (If other than # 4 above): **Same** **Same** **Transportation of the construction of the con	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
	Secretary of State use only
Signature: May M Mular (signature required) Printed Name: CRaig M Niclsin Capacity/Title: OD/Ner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 08/16/2010 05:00 CK: 4573 CT: 158010 BH: 1235020 1 9 25.00 = 25.00 ASSUM NAME # 2