CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersi 99 0CT - 6 AM 9: 03 gives notice of adoption of an Assumed Business Nar 1. The assumed business name which the undersigned use(s) in the transaction of STATE OF IDAHO business is: NIR VARIOR 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address IS HINAIN 83346 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 4. The name and address to which future Phone number (optional): 2008 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West COPY IS (if other than # 4 above): PO Box 83720 BANK (South Burkey) Boise ID 83720-0080 208 334-2301 X Secretary of State use only 282 IDAHO SECRETARY OF STATE Revision 10/06/1999 09:00 CK: 964159 CT: 1935 BH: 255933 Signature: 1 8 28.08 = 28.08 ASSUM NAME # 2 Printed Name: * pm6 corpiforms/abn Capacity: 12781 (see instruction #8 on back of form)