

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. *S/14*

1. The assumed business name which the undersigned use(s) in the transaction of business is: _____

Perfection Cleaning and Restoration Specialist

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
David N. Fisher 1409 Montana, Cd'A, ID. 83814

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 correspondence should be addressed:

David Fisher

1409 Montana
CDA ID: 83814

5. Name and address for this acknowledgment
COPY IS (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature:

Printed Name: David N. Fisher

Capacity: owner and operator

(see instruction # 8 on back of form)

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Secretary of State use only

DEPARTMENT OF STATE

02/23/1999 09:00

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