

Signature:

Capacity: Owner

(see instruction #8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED/EFF:

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

DEC 4 10 33 MH 101

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

1. The assumed business name which the undersigned use(s) in the transaction of business is: Cleaning Maintence 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address B. Escobar W. Grouse 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$20.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** 2201 W. Grouse Ave PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): COPY is (if other than # 4 above): 465-7113 Secretary of State use only Printed Name: IDAHO SECRETARY OF STATE