

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2012 JUN 22 AM 8: 56

Please type or print legibly. Instructions are included on back of application.

SECH BY OF STATE STATE OF IDAHO

The assumed business name which the under	ersigned use(s) in the transaction of
business is:	
<u>Unique Debris</u>	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Parthenia Jean Turner	
3. The general type of business transacted und	
 ✓ Retail Trade ✓ Wholesale Trade ✓ Construction ✓ Agriculture 	and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Parthenia Jean Turner 3182 Cross Idano Falls 10 83401	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (# other than # 4 above): Parthenia Tean Turner 3182 Cross Idaho Falls 10 83401	
gnature: PM	Secretary of State use only
nted Name: Parthenia Jean Turner	
pacity/Title: 0WN&V	
nature:	
nted Name:	IDANO SECRETARY OF STATE
apacity/Title:	06/22/2012 05:0 CK: 3851 CT: 158810 BH: 1329

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