



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

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

2006 FEB -6 AM 9:45

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

1st Choice Carpet Care

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

Sean T. Beno

12102 N. Ruby Dr. Hayden Id. 83835

Laura J. Beno

12102 N. Ruby Dr. Hayden Id. 83835

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

12102 N. Ruby Drive
Hayden Id. 83835

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

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

Same

Phone number (optional):

509-210-2566

Signature: Sean T. Beno

(signature required)

Printed Name: Sean T. Beno

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corporate\labn forms\labn.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
02/06/2006 05:00
CK: 3875 CT: 158810 BH: 936846
1 @ 25.00 = 25.00 ASSUM NAME # 2

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