

FILED/EFFECTIVE

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

01 JUN 21 AM 9:01



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.

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

GROGAN'S PERSONAL CLEANING SERVICE

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
<u>Linda GROGAN</u>	<u>P.O. BOX 32 Spirit Lake Id</u>
<u>KIRK GROGAN</u>	<u>PO BOX 32 Spirit Lake Id</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Linda GROGAN  
P.O. Box 32  
Spirit Lake Id 83869

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

Secretary of State use only

IDAHO SECRETARY OF STATE

06/21/2001 09:00  
CK: 10005 CT: 147873 DH: 483992

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Linda GroganPrinted Name: Linda GROGANCapacity: General Partner

(see instruction # 8 on back of form)

Revision 2/97 g:\comp\forms\slabn.prm6

D 46261