

## 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

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

2006 JAN 13 AN 8 39

Mo	puntain Sun Window Cleaning
e true name(s) and business a siness under the assumed bus	iddress(es) of the entity or individual(s) doing
Name	Complete Address
Kainoa Lopez	P.O. Box 334 Bellevue, ID 83313
egeneral type of business tran	sacted under the assumed business name is:
Date 3 Trans	nsportation and Public Utilities
	rstruction
	iculture Submit Certificate of
Manufacturing Min	Sucrini Cermicale of
Finance, Insurance, and Re	Name and \$25.00 for to:
e name and address to which t	
respondence should be addre	ssed: 700 West Jefferson
fountain Sun Window Cleaning	Basement West PO Box 83720
.O. Box 334	Boise ID 83720-0080
ellevue, ID 83313	208 334-2301
· · · · · · · · · · · · · · · · · · ·	
ame and address for this ackno	owledgment Phone number (optional):
ame and address for this acknopy is (of other than # 4 above).	owledgment Phone number (optional): 208-720-6364
	208-720-6364  Secretary of State use only
	208-720-6364  Secretary of State use only
	208-720-6364

IDAHO SECRETARY OF STATE

1/13/2006 05:00

CK: 10130 CT: 158010 BH: 931939

1 0 25.00 = 25.00 ASSUM NAME # 2

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