



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See Instructions on reverse before filing.

FILED EFFECTIVE

08 MAR 31 PM 2:34

SECRETARY OF STATE
STATE OF IDAHO

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

Maid S cleaning service

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 |
|----------------------|---------------------|
| <u>Scott Colburn</u> | <u>680 Ten mile</u> |
| <u></u> | <u>Meridian ID</u> |
| <u></u> | <u>83646</u> |

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:

Same

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

Signature: Scott Colburn

(signature required)

Printed Name: Scott Colburn

Capacity/Title: owner

(see instruction # 8 on back of form)

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

g:\corp\form\statelabn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
03/31/2008 05:00
CK: CASH CT: 158018 BH: 1187660
1 @ 25.00 = 25.00 ASSUM NAME # 2

D120473



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

08 MAR 31 PM 2:34

SECRETARY OF STATE
STATE OF IDAHO

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

Hip- Red Recycling + Demo

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Scott Colburn

Complete Address

680 Ten Mile Meridian ID
836496

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 checked="" 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:

Same

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

Signature: Scott Colburn

(signature required)

Printed Name: Scott Colburn

Capacity/Title: Owner

(see instruction # 8 on back of form)

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

g:\corp\format\labn format\labn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
03/31/2008 05:00
CK: CASH CT: 158818 BH: 1187660
1 @ 25.00 = 25.00 ASSUM NAME # 3

D120474