227	
CERTIFICATE OF	
ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Bu	e undersigned
Please type or print legibly. NOTE: See instructions on reverse befor	
	STATE OF IDAHO
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
Kira Grant Cleaning Sucs.	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
Name Kine DG cont	Complete Address
	3904 Normandu Dr. Bors, 10 83706
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation Wholesale Trade Construction	and Public Utilities
Services Agriculture	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson
Vina Grant	Basement West PO Box 83720 Boise ID 83720-0080
BORY 10 23705	208 334-2301
5. Name and address for this acknowledgmer	nt Phone number (optional):
COPY IS (if other than # 4 above):	713-0003
	Secretary of State use only
Signature: August Chant	statut pos
Printed Name:	IDAHO SECRETARY OF STATE 08/17/2006 05:00 CK: CASH CT: 158010 BH: 978640 1 0 25.00 = 25.08 ASSUM NAME # 2
Capacity/Title: Curre'	CK: CASH CT: 150010 DF: 000 CK: CASH CT: 150010 DH: 970640 I 0 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	D102851

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