



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

APR 10 2006
CLERK OF THE
STATE OF IDAHO

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

StrongArm Cleaning Services

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

Name

Gordon St.Clair

Complete Address

1778 N. Eagle Creek Way Eagle Idaho 83616

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:

Gordon St.Clair

372 S. Eagle Rd

164

Eagle, IDaho 83616

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):

Phone number (optional):

208-761-2038

Signature: *Gordon St.Clair*

(signature required)

Printed Name: Gordon St.Clair

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\abn_forms\abn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE
03/30/2006 05:00
CK: 1566 CT: 158010 BH: 946296
1 @ 25.00 = 25.00 ASSUM NAME # 2

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