



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

**FILED EFFECTIVE**

2017 MAY 10 PM 12:09

SECRETARY OF STATE  
STATE OF IDAHO

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

His and Hers handyman & cleaning services

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

Desiree M. Alaniz 523 Caribou Dr apt C. Mtn Home Id  
(Name) (Address) 83647

Louis Mendez 3rd 523 Caribou Dr apt C. Mtn Home Id  
(Name) (Address) 83647

(Name) (Address)

(Name) (Address)

3. The general type of business transacted under the assumed business name is:

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

4. Mailing address for future correspondence:

Desiree Alaniz  
(Name)  
523 Caribou Dr apt C  
(Address)  
Mtn Home Id 83647  
(City) (State) (Zipcode)

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

(Name)  
(Address)  
(City) (State) (Zipcode)

Printed Name: Desiree M. Alaniz

Signature: Desiree M. Alaniz

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

05/10/2017 05:00

CK: CASH CT: 158010 BH: 1583483  
10 25.00 = 25.00 ASSUM NAME #2

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