



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.

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

Flying Fingers Finish Cleaning

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

Name _____

James or Connie Giddeon

Complete Address

209 W 3rd Emmett Idaho 83617

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

Retail Trade Manufacturing Transportation and Public Utilities
 Wholesale Trade Agriculture Finance, Insurance, and Real Estate
 Services Construction Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-398-7200

JAMES or GERRIE GIDDON
209 W 3RD

Emmett Idaho 83617

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only
IDaho SECRETARY OF STATE

02/18/1999 09:00
CX: 410 CT: 111300 BH: 189213

1 @ 29.00 = 29.00 ASSUM NAME # 2

Signature: James or Connie Gibbons

Printed Name: James or Connie Giddeon

Capacity: 012685

(see instruction # 8 on back of form)