	FILM
CERTIFICATE OF	ME 2004 SFD
ASSUMED BUSINESS NA	$\begin{array}{c} \text{ME} \\ \text{ersigned} \\ \text{s Name.} \\ \text{STATE OF} \\ 29 \\ \text{STATE OF} \\ 07 \\ 10 \\ \text{HO}^{12} \\ \text{Og} \\ \text{Menons of } \\ \text{State of } \\ 10 \\ \text{HO}^{12} \\ \text{State of } \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ $
Pursuant to Section 53-504, Idaho Code, the under	ersigned
submits for filing a certificate of Assumed Busines Please type or print legibly.	STATE 9:00
NOTE: See instructions on reverse before filir	ng.
 The assumed business name which the undersignation business is: Gonzalez Cleaning 	ned use(s) in the transaction of
 The true name(s) and business address(es) of the true name (s) and business address(es) and the true name (s) and tru	ne entity or individual(s) doing
business under the assumed business name:	
Name	Complete Address 4045 Spartin St., Idaho Falls, ID 83401
Zoila Gonzalez	4045 Spartin St., Idano Pails, 10 03401
 3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Zoila Gonzalez 4045 Spartin Street Idaho Falls, Idaho 83401 5. Name and address for this acknowledgment Copy is (if other than # 4 above): 	
Signature: <u>Juile</u> <u>Jourgales</u> (signature required) Printed Name: <u>Zoila Gonzalez</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 09/29/2004 05 = 00 CK: 2415 CT: 79984 BH: 768492 1 @ 25.00 = 25.00 ASSUM NAME
	D.80485