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## 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.

(see instruction # 8 on back of form)

SECRETARY OF STATE
STATE OF IDAHO

D113681

1. The assumed business name which the ubusiness is:	and Cleaning Services
2. The true name(s) and business address(e business under the assumed business name  Name  Vicki Pierard	cs) of the entity or individual(s) doing me:  Complete Address  2095 W. Marlbarough Ave.  Cocur D' Alene, ID  83815
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Vicki Pierard  2095 W. Nov Iborough Ave Coeur D' Alene, ID 838	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
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above):</li> </ol>	Phone number (optional):  208 - 818 - 2218
	Secretary of State use only
nature: <u>Vicki Pierard</u> nted Name: <u>Vicki Pierard</u> pacity/Title: <u>Owner</u>	IDAHO SECRETARY OF STATE  ### ### ############################