



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.
Instructions are included on back of application.

2016 AUG 23 AM 9:53

SECRETARY OF STATE
STATE OF IDAHO

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

Perfect Clean Janitorial

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

Name
SCOTT A Perry

Complete Address
305 W DRIFTWOOD RD
BOISE Id 83713

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:

305 W DRIFTWOOD RD
BOISE Id 83713 sp

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Signature: Scott A Perry

Printed Name: SCOTT A Perry

Capacity/Title: OWNER

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDaho SECRETARY OF STATE

06/23/2016 05:00

CR: 4143908 CT: 172099 BH: 1543137
 1@ 25.00 = 25.00 ASSUM NAME #2

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