

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. Instructions are included on back of application.

FILED EFFECTIVE

2015 NOV 27 AM 11: 27

SECRETARY OF STATE STATE OF IDAHO

1.	The assumed business name which the undersigned use(s) in the transaction of			
	business is: Kayla's Clean	ivo	Service	
	- Fluyius Cital	119	ITI VILE	
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address			
	Moula Nierra	512 IV	Michleton rd	
	1,000	NNN	06 10 8315	1
		12 ((1))	ta area	24.
				
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade Transportation and Public Utilities			
	Services Agriculture			
	Manufacturing Mining		ubmit Certificate of ssumed Business	
	☐ Finance, Insurance, and Real Estate		lame and \$25.00 fee to:	
4.	The name and address to which future		ecretary of State	
	correspondence should be addressed:		50 North 4th Street	
	- Rame	1	O Box 83720	
			oise ID 83720-0080 08 334-2301	
			00 00 7 200 1	
5.	Name and address for this acknowledgment			
	COPY is (if other than # 4 above):			
	·			
	1/2 // 1.		Secretary of State use only	
Signa	ture Muyla Vilma		IDAHO SECRETARY OF STA	TE
Printe	ed Name: Alla Verra		11/27/2015 05:0	0
	city/Title:		K:CASH CT:317331 BH:1 25.00 = 25.00 ASSUM	
		1	Lu- Lu- Lu- Lu- Lu- Lu- Lu- Lu- Lu-	anataria 🏋 d

1)182901

Signature:

Printed Name: _____

Capacity/Title: