

## **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.

AND SEP 15 AM 9: 43

Please type or print legibly. NOTE: See instructions on reverse before filing.

		THE OF IDAIN
1. The assumed business name which the under	ersigne	d use(s) in the transaction of
business is:		
Precision Carpel Cleaning		Made C MA - HARRIST
The true name(s) and <u>business</u> address(es) business under the assumed business name     Name		entity or individual(s) doing  Complete Address
	_	
Thomas Steed	<u> 231</u>	7 No Ranhide Ridge Rd Fulls +0 87854
	POS.	FULLS +0 87854
<ol><li>The general type of business transacted und</li></ol>	er the a	issumed business name is:
Transportation	and Dul	blia l Itilitias
Retail Trade Transportation	and Pul	one offices
Wholesale Trade Construction		
Services Agriculture		Submit Certificate of
☐ Manufacturing ☐ Mining		Assumed Business
		Name and <b>\$25.00</b> fee to:
4. The name and address to which future		Secretary of State
correspondence should be addressed:		700 West Jefferson
•		Basement West
Tom Stead		PO Box 83720
2317 No Rambide Ridge Rol		Boise ID 83720-0080
# POT FOLIS ID 83854		208 334-2301
## FOX, FOID # 8 /8:3-1		Di ana anna bana an an
5. Name and address for this acknowledgmen	ıt	Phone number (optional):
COPY IS (if other than # 4 above).		28-610-3625
precision care; cleaning		
70 Box 3013		Secretary of State use only
Benners Ferry AD &3805	55	
	g'corp'torms'abn forms'abn.p65 Revised04/2003	
Signature: (Signature required)	forms 2003	IDANO SECRETARY OF STATE
Printed Name: Thomas' Street	Mabn ed 04	09/15/2003 05:00
Timed Halle.	Vorms\abn form Revised 04/2003	CK: 94 CT: 158818 BH: 701661 1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title: OLM	duos	e a manage parace industrial in the
(see instruction # 8 on back of form)	, pa	

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