

Printed Name:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

285 KER 15 MI 9: 18

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.

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
HONGLOOM TIE	King St
Teacher m	51diam 1d 83/042
1114	A LOCAL A
3. The general type of business transacted under the assumed business name is:	
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Retail Trade Transportation and Pu	IDIIC Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
00 -1 1 01	Basement West
Murphy's Cleaning Crew	PO Box 83720 Boise ID 83720-0080
TIE King St	208 334-2301
Meridian, la 83642	
5. Name and address for this acknowledgment	Phone number (optional):
CODY IS (if other than # 4 above):	248 5732972
• •	10000104
	Secretary of State use only
	decidally of data ass only
901	$\bigwedge \bigwedge -2^{-1}$
Signature: All Market Burners	() 875 ⁷ 4
(signature required)	, , , , , , , , , , , , , , , , , , ,
Signature: Signature required Name: Heather Much Disconsideration of the Capacity/Title: Owner Capacity/Title: Signature required Name: Heather Much Disconsideration of the Capacity/Title: Signature required Name: Heather Much Disconsideration of the Capacity/Title: Signature required Name: Heather Name: Heat	IDAHO SECRETARY OF STATE 03/15/2006 05:00
Capacity/Title: Owner get "	CK: 3310 CT: 156010 BH: 943319 1 @ 25.00 = 25.00 ASSUM NAME # 2
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