

CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code. Filing fee: \$25.00.

FILED EFFECTIVE

2017 JAN 27 AM 11: 53

SECRETARY OF STATE STATE OF IDAHO

| 1. | The assumed business name which the undersigned use(s) in the transaction of business is: | | | |
|---------------|--|--|--|----------------------|
| | Cesar's Cleanin | ng | | |
| 2. | The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1): | | | |
| | CESAL PONCE | 10272 w 20 (Address) | orkwold St for | SE ID 8369 |
| | (Name) | (Address) | | |
| | (Name) | (Address) | · · · · · · · · · · · · · · · · · · · | |
| | (Name) | (Address) | | |
| 3. | The general type of business transacted under the assumed business name is: | | | |
| | Retail Trade Wholesale Trade Services | Construction Agriculture Manufacturing | Transportation and PublicMiningFinance, Insurance, and R | |
| | Mailing address for future corr CSAL PCN (Name) 10676 W LOCKW (Address) City (State | • | i. Name and address for this ackno copy is (if other than # 4): (Name) (Address) (City) (State) | wledgment (Zipcode) |
| | | 0-1-5 | (51)) | (a.p.todo) |
| | nted Name: (= SAR gnature: (= SAS (| ave | Secretary of State use only | |
| Printed Name: | | | 10AHO SECRETARY OF STATE 01/27/2017 05:00 | |
| Się | gnature: | | CK:4521454 CT:172099 16 25.00 = 25.00 AS | |
| Pri | nted Name: | | | |
| Sig | gnature: | Rev. 08/2015 | D191772 |) |