

227



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.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

05 JUL 12 PM 2:32

SECRETARY OF STATE
STATE OF IDAHO

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

HOT SHOTZ HI PRESSURE WASH

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

PAUL J. MCKEAN

P.O. BOX 1057

GLENN'S FERRY, ID. 83623

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:

HOT SHOTZ
P.O. BOX 1057
GLENN'S FERRY, ID. 83623

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

Submit Certificate of
Assumed Business
Name and ~~\$20.00~~ fee to:
25.00

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

Secretary of State use only

Signature: Paul J. McKean

Printed Name: PAUL J. MCKEAN

Capacity: _____

(see instruction # 8 on back of form)

c:\temp\assumed\forms\id\id65
11/16/01 11/20/01

IDAHO SECRETARY OF STATE
07/12/2005 05:00
CK: CASH CT: 150010 BH: 820017
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 89614