

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 OCT 14 AM 8: 23

Please type or print legibly.
Instructions are included on back of application.

SECRET RY OF STATE STATE OF IDAHO

D142775

Sa	awtooth Window Cleaning
The true name(s) and <u>business</u> ad business under the assumed business <u>Name</u> Lee Machuga Roberta Machuga	Idress(es) of the entity or individual(s) doing ness name: Complete Address 1840 Edmiston Dr. Idaho Falls, ID 83401 1840 Edmiston Dr. Idaho Falls, ID 83401
Retail Trade Trans Wholesale Trade Cons	sacted under the assumed business name is: sportation and Public Utilities struction
Services Agric Manufacturing Minim Finance, Insurance, and Rea	Assumed Business
The name and address to which for correspondence should be address Lee Machuga	sed: 450 North 4th Street PO Box 83720
1840 Edmiston Dr. Idaho Falls, ID 83401	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknow copy is (if other than # 4 above):	vledgment
	Secretary of State use only
ignature: Joe Maluga	<u></u>
rinted Name: Lee Machuga	<u> </u>
apacity/Title: Owner ignature:	IDAHO SECRETARY OF STATE 10/14/2/2010 05:00
rinted Name: Roberta Machuga	CK: 1012 CT: 158010 BH: 1242964 1 9 25.00 = 25.00 ASSUM NAME # 6
apacity/Title: Co-Owner	

abn.pmd Rev. 07/2010