



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.
Instructions are included on back of application.

FILED EFFECTIVE

11 APR 25 AM 9:11

SECRETARY OF STATE
STATE OF IDAHO

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

ComClean

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

Bryant Evan Hinckley

1547 101a St Idaho Falls ID 83402

Jaron Leavitt

4201 COSTA DR. Idaho Falls

83401

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 | |

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

1547 101a St Idaho Falls ID 83402

4201 COSTA DR. Idaho Falls Id

83401

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

Signature: Bryant Hinckley

Printed Name: Bryant Hinckley

Capacity/Title: Partner

Signature: Jaron Leavitt

Printed Name: Jaron Leavitt

Capacity/Title: Partner

Secretary of State use only

IDAHO SECRETARY OF STATE
04/25/2011 05:00
CK: CASH CT: 167877 BH: 1278579
1 @ 25.00 = 25.00 ASSUM NAME # 2

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