

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

FILED EFFECTIVE  
2006 JUL 29 AM 8:52

SECRETARY OF STATE  
STATE OF IDAHO

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

Lisa's Cleaning Service

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

Lisa McLuskie

1110 Soft Breeze Ave PF, ID 83854

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

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

Phone number (optional): 208 699-3754

Lisa McLuskie  
1110 Soft Breeze Ave  
Post Falls ID 83854

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

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

Secretary of State use only

Signature: Lisa McLuskie

Printed Name: Lisa McLuskie

Capacity: owner

(see instruction # 8 on back of form)

Revision 2/97  
g:\compforms\slbn.pms

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IDAHO SECRETARY OF STATE  
06/29/2006 05:00  
CK: 1487 CT: 158018 BH: 962585  
1 @ 25.00 = 25.00 ASSUM NAME # 2