## CERTIFICATE OF ASSUMED BUSINESS NAME

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	Please type or print legibly.  ASSUMED BUSINESS IV. to the undersign pursuant to Section 53-504, Idaho Code, the undersign submits for filing a certificate of Assumed Business National Please type or print legibly.  Please type or print legibly.		2005 AUG 22 SECRETARY	OF STATE	
	c instructions uniteres		STATE OF	- 机涡体)	
1.	The assumed business name which the undersigne	:d use(	s) in the tra	nsaction of	
	business is; MAID TO CLEAN		, ,	ı/a) doing	
	The true name(s) and <u>business</u> address(es) of the	entity	or individua	I(s) doing	
2	business diddi we	<u>C</u> c	mplete Add	Iress	52869
	Name SELIERS P.O	BOX	698,5	sirit LAKO I	(ID838/4
	Pappie Peck	5.W	DIFLOGEC	n selong	ID 83837
	5 Nerry Wiltse Wis	<u> </u>	mad busine	ess name is:	
3. The general type of business transacted under the assumed business name is:					
	Transportation and	Public	Utilities		,
	<ul> <li>☐ Retail Trade</li> <li>☐ Wholesale Trade</li> <li>☐ Construction</li> <li>☐ Agriculture</li> <li>☐ Mining</li> </ul>		Submit Cer Assumed E Name and	tificate of Business \$25.00 fee to:	
	Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:		Secretary 700 West Basement	Jefferson West	
	4505 S. Wolf Lodge Creek Rd.		DO Boy 8	3720 33720-0080	
	5 Name and address for this acknowledgment	<b>)</b>	Phone nul 식08 -	mber (optional): 8/8-30/60% 20%	651-2128
	copy is (if other than # 4 above):			- Chata USP ()	II
		l	Sec	cretary of State use o	-
	Signature Signature required	gʻkorpitorms'abn forms'abn.p65 Revised 04/2003		IDAHO SECRETA Ø8/23/200 CK: 11183 CT: 191 1 8 25.88 = 25.6	RY OF STATE 05 05 06 697 BH: 907691 0 ASSUM NAME # 2
	Printed Name: Bonnie, Feet	Corp/form		D90	877
	Capacity/Title: <u>for Ther</u>	Ö			

(see instruction # 8 on back of form)