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# 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**

2013 FEB -7 AM 8:59

SECRETARY OF STATE
STATE OF IDAHO

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

   Mike'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:

| Name | Complete Address |
|---|---|
| Michael Z. Nielsen | 604 11th St. |
| | McCammon, Idaho |
| | 83250 |

3. The general type of business transacted under the assumed business name is:

   - ☐ Retail Trade
   - ☐ Wholesale Trade
   - ☒ Services
   - ☐ Manufacturing
   - ☐ Finance, Insurance, and Real Estate
   - ☐ Transportation and Public Utilities
   - ☐ Construction
   - ☐ Agriculture
   - ☐ Mining

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

   Michael Nielsen
   604 11th St. McCammon, Idaho 83250

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

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

Signature: _____
Printed Name: Michael Nielsen
Capacity/Title: Owner
Signature: _____
Printed Name: _____
Capacity/Title: _____

**Secretary of State use only**

IDAHO SECRETARY OF STATE
02/07/2013 05:00
CK: 997 CT: 279111 BH: 1359185
1 @ 25.00 = 25.00 ASSUM NAME # 2

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