



CERTIFICATE OF ASSUMED BUSINESS NAME

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

06 NOV 20 PM 2: 36

Please type or print legibly.
NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

M.S. Cleaning Services

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
<u>Melissa Schumaker</u>	<u>1280 E. Sharon's Loop</u>
	<u>Nampa, ID 83856</u>

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 | |

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

Melissa Schumaker
1280 E. Sharon's Loop
Nampa, ID 83856

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

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):

Phone number (optional):

Signature: Melissa Schumaker
(signature required)

Printed Name: Melissa Schumaker

Capacity/Title: owner
(see instruction # 8 on back of form)

g:\comp\information\form\abn.p65
Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
11/20/2006 05:00
CK: CASH CT: 158010 BH: 1014735
1 @ 25.00 = 25.00 ASSUM NAME # 2

D105752