



CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 NOV 17 AM 8:51

SECRETARY OF STATE
STATE OF IDAHO

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

White Glove Carpet & Upholstery Cleaning

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

White Glove, Inc.

PO Box 4723, Ketchum, ID 83340 (C139039)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

☐

Retail Trade

☐

Construction

☐

Transportation and Public Utilities

☐

Wholesale Trade

☐

Agriculture

☐

Mining

☒

Services

☐

Manufacturing

☐

Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

White Glove, Inc.

(Name)

PO Box 4723

(Address)

Ketchum, ID 83340

(City)

(State)

(Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Michael Pierce

Signature: *Michael Pierce*

Printed Name: _____

Signature: _____

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

11/17/2015 05:00

CK:2525 CT:135408 BH:1500806

10 25.00 = 25.00 ASSUM NAME #4

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