

CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

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

11 FEB 16 AM 8: 42

SECTAL OF STATE

<u>Please type or print legibly.</u> <u>Instructions are included on back of application.</u>

1.	The assumed business name which the undersigned use(s) in the transaction of business is: Knock Down Pest Control		
2.	The true name(s) and <u>business</u> address(es business under the assumed business name Name	•	
3.	The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture		
	☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: Knock Down Pest Control 160 W. Cassia Ave. Richfield, ID 83349		Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgme copy is (if other than # 4 above):	nt	
Ciana	•		Secretary of State use only
_	ature:		
Capa	acity/Title: Pwner,		IDAHO SECRETARY OF STATE 02/16/2011 05:00
Printe	ed Name:		CK: 816 CT: 255533 BH: 1266189 1 8 25.80 = 25.80 ASSUM NAME # 2
Capa	icity/Title:		8

1) 145302