

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned **JUN 1 AM 9:23**
gives notice of adoption of an Assumed Business Name.

SECRETARY OF STATE

1. The assumed business name which the undersigned uses in the transaction of business is:

White Tornado Cleaning

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Martha Van Zee</u>	<u>4205 Colonial Way</u>
<u>(Sole Proprietor)</u>	<u>Idaho Falls, ID 83404</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

(208)

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

Phone number (optional): 528-6908

Martha Van Zee CEO
4205 Colonial Way
Id. Falls, ID 83404

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

Signature:

Martha Van Zee

Printed Name:

Martha Van Zee

Capacity:

Sole Proprietor

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

06/01/1999 09:00
CK: 968 CT: 116197 BH: 221321

1 @ 20.00 = 20.00 ASSUM NAME # 2

D26440

Revision 2/97

9 CorpForm 1300 pm6