



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.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE
2006 SEP 13 AM 9:01

SECRETARY OF STATE
STATE OF IDAHO

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

Laundry Day

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

Name
Bonnie J Harman
Emery Harman

Complete Address
2090 Concordia Way Twin Falls
2090 Concordia Way Twin Falls

ID 23301
ID 23301

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 | |

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

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

2090 Concordia Way
Twin Falls ID 23301

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

Phone number (optional):

208-733-3814

Secretary of State use only

Signature: Bonnie J Harman

Printed Name: Bonnie J Harman

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
09/13/2006 05:00
CK: 1015 CT: 158010 BH: 974811
1 25.00 = 25.00 ASSUM NAME # 2

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