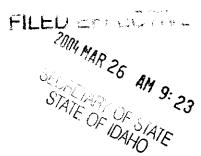


## CERTIFICATE OF ASSUMED BUSINESS NAME

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.



|  |   | "DAYONE  |
|--|---|--|
| The assumed business name which the und business is:      Master Cleaning Services   |   |  |
| 2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  Tris C. Garcia   | of the e                                  | 1  |
| 3. The general type of business transacted und  Retail Trade Transportation  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate |   |  |
| 4. The name and address to which future, correspondence should be addressed:  Tris C. Garcia  127 U Venice  Vanya, Id. 83687   |   | Secretary of State<br>700 West Jefferson<br>Basement West<br>PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301 |
| <ol> <li>Name and address for this acknowledgmen<br/>copy is (if other than # 4 above):</li> </ol>   | t   | Phone number (optional): (208) 703-4061  |
|  | 8   | Secretary of State use only  |
| Signature: Signature:  | skabn. po                                 | 11,1400  |
| (signature required)   | o4/2003                                   | IDAHO SECRETARY OF STATE   |
| Printed Name: Iris C. Garcia   | g koop Vorms labn, p65<br>Revised 04/2003 | 03/26/2004 05:00<br>CK: 996 CT: 158010 BH: 735702<br>1 @ 25.00 = 25.00 ASSIM NAME # 2                            |
| Capacity/Title: <u>Owner</u>   | dico 6                                    | 1 6 52.00 = 52.00 ASSUM NAME # 5   |
| (see instruction # 8 on back of form)  | i   |  |