

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

FILED EFFECTIVE

2016 AUG -4 PM 3: 55

SECRETARY OF STATE  
STATE OF IDAHO

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

Quality Window 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):

Benjamin Maier  
(Name)

607 Falls Ave W. Twin Falls, ID 83301  
(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

- ☐ Retail Trade  
☐ Wholesale Trade  
☒ Services

- ☐ Construction  
☐ Agriculture  
☐ Manufacturing

- ☐ Transportation and Public Utilities  
☐ Mining  
☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

Benjamin Maier  
(Name)

607 Falls Ave W.  
(Address)

Twin Falls ID 83301  
(City) (State) (Zipcode)

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

(Name)

(Address)

(City)

(State)

(Zipcode)

Printed Name: Benjamin Maier

Signature: Benjamin Maier

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/05/2016 05:00

CK:4097414 CT:172099 BH:1540620

1@ 25.00 = 25.00 ASSUM NAME #2

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