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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.

08 AUG 14 AM 8: 47

SECRETARY OF STATE STATE OF IDAHO

CASCADE WINDOW CLEANING	
2. The true name(s) and business address(es business under the assumed business name Name SAM CAMPBELL	s) of the entity or individual(s) doing ne: Complete Address 241 1/2 HARVARD AVE, REXBURG, ID 83440
Itelaii Hade '.	n and Public Utilities
 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: SAM CAMPBELL 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
241 1/2 HARVARD AVE. REXBURG, ID 83440	(208) 334-2301
5. Name and address for this acknowledgm copy is (If other than # 4 above).	ent
	Secretary of State use only
nature: (elgnature required) sted Name: SAM CAMPBELL pacity/Title: OWNER	IDAHO SECRETARY OF STATE OB/14/2008 05:0 CK: 1612 CT: 228802 BH: 11315 1 8 25.00 = 25.00 ASSUM NAME

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