

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.

2007 FEB 28 All 9: 6

	Jan-Pro Cleaning	Systems
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
	Name	Complete Address
	Steven F. Dion	2254 N. Ridgeview Dr.
		Post Falls, Id. 83854
3.	The general type of business transacted under the assumed business name is:	
	Retail Trade Transportation and	Public Utilities
	 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future	Secretary of State
	correspondence should be addressed:	700 West Jefferson
	Steve Dion	Basement West
	2254 N. Ridgeview Dr.	PO Box 83720 Boise ID 83720-0080
	Post Falls, Id. 83854	208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):

		Secretary of State use only
	ure:	
nati	ure:	008680
ntec	(signeture required) I Name: Steven F. Dion	10100403
paci	ity/Title: Owner	
	(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE
	(See Instruction # 8 on back of form)	02/28/2007 05:0