



CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly. See instructions on reverse.)

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To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. AM 8: 58

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

ACI-Cleaning Service

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

| | |
|--------------------------|-------------------------|
| <u>Carolee A. Smith</u> | <u>Name</u> |
| <u>1249 Shore Drive</u> | <u>Complete Address</u> |
| <u>PO Box 793</u> | |
| <u>Cascade, Id 83611</u> | |

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

Retail Trade Manufacturing Transportation and Public Utilities
 Wholesale Trade Agriculture Finance, Insurance, and Real Estate
 Services Construction Mining

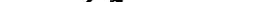
4. The name and address to which future correspondence should be addressed: Phone number (optional): 315-1290 (cell)

Carolee A Smith
P O Box 793
Cascade Id 83611

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

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:
25.00
Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State was only

Signature: 

Printed Name: Carolee A Smith

Capacity: N/A

(see instruction # 8 on back of form)

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IDaho SECRETARY OF STATE
10/19/2004 05:00
CK: 637 CT: 150010 BH: 771831
1 @ 25.00 = 25.00 ASSUM NAME # 2

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