



# 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.**

**FILED EFFECTIVE**

2004 AUG 10 P 3: 32

STATE OF IDAHO

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

## A-1 Pest Control

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

Name

Robert J. Empey

### Complete Address

**380 Croft St., Idaho Falls, ID 83401**

**Marlene Empey**

380 Croft St., Idaho Falls, ID 83401

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

- 4. The name and address to which future correspondence should be addressed:**

**Marlene Empey**

380 Croft St., Idaho Falls, ID 83401

**Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:**

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
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**

**Signature:**

[signature required]

Robert J. Empey

Printed Name:

**Capacity/Title:**

owner

(see instruction # 8 on back of form)

Revised 04/2010

IDAHO SECRETARY OF STATE  
 08/10/2004 05:00  
 CK: 81034130222KAM CT: 172099 BH: 760134  
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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