

Signature:

Capacity/Title:

Printed Name: wand

OWYLE

(see instruction # 8 on back of form)

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

05 JUL 22 PM 3: 24

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	Del IO
 The assumed business name which the undersigned use(s) in the transaction of business is: 	
Handis Cleaning &	Service
The true name(s) and <u>business</u> address(es) of the e business under the assumed business name: Name	ntity or individual(s) doing <u>Complete Address</u>
Handris Cleaning Service 203	O.D. Deulin Auc.
Mandy Kinney Heri	dian 110 831042
3. The general type of business transacted under the a	assumed business name is:
 ☐ Retail Trade ☐ Wholesale Trade ☐ Construction ☐ Agriculture ☐ Manufacturing ☐ Mining 	Submit Certificate of Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real EstateThe name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
2030 D. Devlin Are.	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Mendian, 10 831642	•
Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	288-0567
	Secretary of State use only
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IDAHO SECRETARY OF STATE

07/22/2005 05:00

CK: 578471 CT: 172099 RH: 822860
1 0 25.00 = 25.00 ASSUM NAME # 2

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