

FILED EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

11 JUN -3 PM 3:35

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

High Quality Housekeeping

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

Cara Layne

3225 South Milan Place
Meridian ID. 83642

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Cara Layne
3225 S Milan Pl.
Meridian ID 83642

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

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: Cara Layne

Printed Name: Cara Layne

Capacity/Title: Owner

Signature: X

Printed Name: _____

Capacity/Title: _____

IDAHO SECRETARY OF STATE
06/03/2011 05:00
CX: CASH CT: 150010 BH: 1276780
1 @ 25.00 = 25.00 ASSUM NAME # 2

D148071