

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 MAY 24 AM 9: 12

SECRETARY OF STATE STATE OF IDAHO

D55239

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned business is: Arnold Window CLean	
2. The true name(s) and <u>business</u> address(es) of the er business under the assumed business name: Name TASON D. Arnold (Sum) (105/ L) Becky L, Annold (Sum) Mack	Complete Address Suckboard Trail#3 Good, TO 83221
3. The general type of business transacted under the a Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: 1051 Buckboard Trail #3 Blackfoot, ID 83221	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
994.	Secretary of State use only
Signature: Jason D. Arnold Printed Name: Jason D. Arnold Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 95/24/2002 95:00 CK: 851 CT: 158010 BH: 467778 1 8 20.00 = 20.00 ASSUM NAME # 2