



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED
99 OCT -3 AM 9:08
STATE OF IDAHO

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.

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

THE MOP SQUAD

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

Name	Complete Address
<u>Cindy Pflugh</u>	<u>556 S 50 W</u>
<u></u>	<u>Victor, ID 83455</u>
<u></u>	<u></u>

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

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

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

Phone number (optional): 208-787-2847

THE MOP SQUAD
556 S 50 W
Victor, ID 83455

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

Signature: Cindy Pflugh

Printed Name: Cindy Pflugh

Capacity: OWNER

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only
IDAHO SECRETARY OF STATE

10/08/1999 09:00
CK: 83569875007 CT: 121497 BH: 256606

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 29848

Revision 1/98

g:\corpforms\abn.p65