

CERTIFICATE OF ASSUMED BUSINESS NAME

1HE 9		Title 30, Cha Filing fee: \$	MED E apter 21, Pa 325.00.	BUSINESS N art 8, Idaho Code.		SECRETARY OF STATE OF DASTATE	•			
1,	The assumed business name which the undersigned use(s) in the transaction of business is:									
	All Clear Window Cleaning									
2.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):									
	Jarom Anderson (Name)			2071 Prospector Way, Twin Falls, Idaho 83301 (Address)						
	(Name)		(Ac	(Address)						
	(Name)		(Ac	(Address)						
	(Name)		(Ac	ddress)		4.11	Marie Harrison Control of the Contro			
3.	The general type of business transacted under the assumed business name is:									
	☐ Retail T	rade ale Trade		Construction Agriculture	_	nsportation and Pub iing	lic Utilities			
		es		Manufacturing	☐ Fina	ance, Insurance, and	l Real Estate			
4.	Mailing address for future correspondence:				5. Name and copy is (if o	address for this ack	nowledgment			
	Jarom And	erson		······································	().					
	,	oector Way			(Name)					
	(Address)				(Address)					
	Twin Falls		ID	83301						

	All Clear Window Cle	aning										
2.	The individual and/or entity names and business address(es the assumed business name (do <u>not</u> include the name you listed in											
	Jarom Anderson		207	1 Prospector	Way,	Twin Fa						
	(Name)	ess)										
	(Name)		(Addre	ess)								
	(Name)		(Address)									
	(Name)		(Addr	2 5s)								
3.	The general type of business transacted under the assumed											
	Retail Trade			Construction	1							
				Agriculture								
	⊠ Services			Manufacturi	ng							
4.	Mailing address for fut	ondence:	5.	Name copy is								
	Jarom Anderson											
	(Name) 2071 Prospector Way		(Name)									
	(Address)	v a-va-				(Address						
	Twin Falls	ID		83301								
	(City)	(Sta	te)	(Zipcode)		(City)						
Pri	nted Name: Jarom And	lerson										
Sig	nature:		, personal and the second seco	· · · · · · · · · · · · · · · · · · ·								
Pri	nted Name:											
Sig	nature:	-										
Pri	nted Name:											
Sic	inature:											

Secretary of State use only

Rev. 08/2015

IDAHO SECRETARY OF STATE 06/14/2017 05:00

CK:98 CT:341172 BH:1588893 1@ 25.00 = 25.00 ASSUM NAME #2

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