

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2014 DEC 17 AM 8: 59

SECRETATION STATE

Please type or print legibly.

Instructions are included on back of application.

Capacity/Title: <u>(o-\wyor</u>

C-Thru Window Washing	
G-71110 VVIIIdOW VVasimiy	
The true name(s) and <u>business</u> a business under the assumed bus	address(es) of the entity or individual(s) doing siness name:
<u>Name</u>	Complete Address
Jace Thompson	202Falls Terrace Ln Orofino ID 83544
Jessica Thompson	202 Falls Terrace Ln Orofino ID 83544
. The general type of business tran	nsacted under the assumed business name is:
	nsportation and Public Utilities
	nstruction
■ Services	riculture
☐ Manufacturing ☐ Min	Submit Certificate of
Finance, Insurance, and Re	Assumed Business eal Estate Name and \$25.00 fee to:
I. The name and address to which	first tra
correspondence should be addre	Secretary of State
Jace Thomoson	PO Box 83720
202 Falls Terrace Ln Orofino ID 83544	Physical Boise ID 83720-0080
PO Box 1892 Orofino ID 83544-1892 M	208 334-2301
. Name and address for this ackno	
COpy is (if other than # 4 above):	······································
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	Secretary of State use only
nature: /ac/	
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	12/17/2014 05:00
7 / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	CK:1041 CT:304226 BH:145
nature: Juga Thomp	16 25.00 = 25.00 ASSUM N
nted Name: Jessica Thomas	50n

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