

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

2007 MAR -5 AM 9: 13

Please type or print legibly.
NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

	STATE OF IDEAL
<ol> <li>The assumed business name which the unbusiness is:</li> </ol>	dersigned use(s) in the transaction of
Dunn's Cleaning Service	<u>re</u>
The true name(s) and business address(es business under the assumed business name).	s) of the entity or individual(s) doing
Name	Complete Address
Luena Dunn	523 Arrowhead Dr
	Nampa, ID 83685
3. The general type of business transacted un	
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction	and Public Utilities
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  Luena Dunn  523 Arrowhead Dr  Namoa ID 93687	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):  5ame as Ahove	nt Phone number (optional):
	Secretary of State use only
	1
Signature: <u>Juana Juana</u> Brinton Name: (signature required)	d oe2000
Printed Name: <u>Luena Dunn</u>	Parket
Capacity/Title: <u>o wh ex</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  93/05/2007 05:00  CK: 2503 CT: 158010 BH: 1036993  1 2 25:00 = 25:00 ASSUM MANE #