| | CERTIFICATE OF ASSU (Please type or print legibly. | See instructions on reverse.) |
|--|---|---|
| The state of the s | To the SECRETARY OF STATE, STA Pursuant to Section 53-504, Ide gives notice of adoption of an A | and Code, the undersigned |
| 1. | The assumed business name which the u business is: | ndersigned use(s) in the transaction of |
| | my girls c | leaning |
| 2. | The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| | Marthy Shippy | 5786 HILLICIA Or Nome I do 20 |
| | Jeanette Edison | 1410 W flamingo of Nompo Idates, |
| | - Michielle Munson Fleathor Duckett | 101 Kings Rd Namper I done 838861 |
| 3. | The general type of business transacted uniformerk only those that apply) | under the assumed business name is: |
| 4 . | correspondence should be addressed: | Finance, Insurance, and Real Estate |
| | Martha Shiper 5786 Hill View Dr Nunga | Submit Certificate of Assumed Business Name and \$20.00 fee to: |
| | Name and address for this acknowledgme copy is (if other than # 4 above): Teavette Edison | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| | Number , Idams, 8365 | Secretary of State use only IDAHO SECRETARY OF STATE |
| Signatu | 0 - 24 8 10 - | M4/1W/1998 Ø9:00 CK: CRSH CT: 9/192 BH: 99%? |
| Printed Name: Tearette Edisan | | |
| Capacity: <u>Partever</u> (see instruction # 8 on back of form) D 13898 | | |