CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAH 2 33 PM 100 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 size (s) in the transaction of
	business is:	

	POS LANDSCAPE and DESIGN CONCEPTS					
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 Steven G. Sweeney		Complete Address 9072 MARIG-OCD ST.			
		GARDEN CITY (ADA CNIY)				
		I	D. 8	3714		
3.	The general type of business transacted un (mark only those that apply)	he assui	ımed business name is:			
	Retail Trade	; [[_	nsportation and Public Utilities ance, Insurance, and Real Estate ing		
4.	The name and address to which future Phone number (optional): (208) 375-7428 correspondence should be addressed:					
	GARDEN CITY, ID. 83714			Submit Certificate of Assumed Business Name and \$20.00 fee to:		
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	it		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301		
		2/99		Secretary of State use only 1DAHO SECKETARY OF STATE		

Signature;

Printed Name: STEVE

Capacity: Owner

(see instruction # 8 on back of form)

67/26/2000 09:00 CK: 194 CT: 134884 EH: 336444

1 0 20.00 = 20.00 ASSUM NAME # 2