

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

SECRETARY OF STATE OF IDAHATE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

NOTE: See instructions on reverse before filing	j.	•
The assumed business name which the undersign business is:     Ols Lawn Service	ed use(s) in the transaction of	
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Olfonso M. Guzman H.  Suzette E. Guzman Fn  3. The general type of business transacted under the	Complete Address  I E Central R  1 m eT, IO 831	<u>d</u> e17
Retail Trade Transportation and Post Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  CIFCOSO M GUZMAN  HI E CENTRAL Rol  EMMETI ID 831917	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
5. Name and address for this acknowledgment copy is (if other than # 4 above):  Same	Secretary of State use only	·
Signature: Afforms M. Humber  Printed Name: OI FONSO M. GUZMA  Capacity/Title OWN ER	IDAHO SECRETARY 05/15/2008 CK: 1814 CT: 158018 1 0 25.00 = 25.00	OF STATE 125:00 BH: 111527 ASSUM MANE I

D121865