

Capacity/Title: OUTION

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

11 DEC 16 AM 8: 36

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

Living Wa	ater Lawncare
The true name(s) and <u>business</u> address(e) business under the assumed business name Name Brittney Holmes Kyle Holmes	· · · · · · · · · · · · · · · · · · ·
The general type of business transacted u Retail Trade Transportatio Wholesale Trade Construction Services Agriculture	n and Public Utilities
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: 29825 N 6th St	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080
Athol, ID 83801 Name and address for this acknowledgme copy is (if other than # 4 above):	208 334-2301 ent
OOPY 13 (ii ouisi utati # 4 above).	
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abn.pmd Rev. 07/2010

12/16/2011 05:00 CK: NO CHECK# CT: 265849 BH: 1382917 1 9 25.88 = 25.88 ASSUM NAME II 2

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