

## **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 MAR 11 AM 8: 55

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

SECRET RY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersign business is:  5 kywa lker Tree C	, ,
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Richardson Tree (are Inc.  (160576)	e entity or individual(s) doing  Complete Address  994 Skyline RU  Vaples, ID 83847
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Skywalker Tree Care  994 Skyling Rf  Naples TD 8384>  5. Name and address for this acknowledgment copy is (if other than #4 above):	
Signature: Mechae Schorpequired)  Printed Name: Michae Schorpequired Capacity/Title: President - Richarden Tree Cane	IDAHO SECRETARY OF STATE  103/11/2011 05:00  CK: 2415 CT: 256429 BH: 1263827  1 9 25.00 = 25.00 ASSUM NAME # 2

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(see instruction # 8 on back of form)

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