

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

11 MAY 26 PM 4: 07

FILED EFFECTIVE

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

STATE OF STATE

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

business is:	NEY DO LAWN CARE
The true name(s) and <u>business</u> add business under the assumed business <u>Name</u> DANIELLE HERNANDEZ	Iress(es) of the entity or individual(s) doing ess name: <u>Complete Address</u> 12172 W. MESQUITE DR. BOISE, ID 83713
Retail Trade Transp	acted under the assumed business name is: portation and Public Utilities ruction
☐ Manufacturing ☐ Mining☐ ☐ Finance, Insurance, and Real	Assumed Business
4. The name and address to which fut correspondence should be address DANIELLE HERNANDEZ 12172 W. MESQUITE DR. BOISE, ID 83713	Secretary of State
5. Name and address for this acknowledge copy is (if other than #4 above):	edgment
gnature: Advis Maria de Sana ut	Secretary of State use only
nted Name: DANIELLE HERNANDEZ	
pacity/Title: PRESIDENT / owner	IDAHO SECRETARY OF STATE
gnature: inted Name:	

D147942