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

To the SECRETARY OF STATE, STATE OF IDAHO

(see instruction # 8 on back of form)

Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an Assumed Business N	all 4 01 PM '01
1.	The assumed business name which the undersigned us business is: Spring time Lawn Ser	STATE OF STATE
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Thomas Schiffhager 1.6	mplete Address Box 622 Frytland 83
•		
3.	The general type of business transacted under the assumed (mark only those that apply)	umed business name is:
		ansportation and Public Utilities nance, Insurance, and Real Estate ning
The name and address to which future Phone number (optional): correspondence should be addressed:		er (optional):
	10m Schiffhauer P.O. Box 622	Submit Certificate of Assumed Business Name and \$20.00 fee to:
~ <u>.</u> 5.	Name and address for this acknowledgment	Secretary of State 700 West Jefferson Basement West
3	COPY IS (if other than # 4 above).	PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only 19040 SECRETARY OF STATE
	Revision 2797	26/11/2001 09:00 CK: CASH CT: 147482 BH: 401883
Signati	ure: om beliffe	1 0 20.00 = 20.00 AGSUM HAME # 2
Printed	ity: A NOCY	
Capac	ity: <u> </u>	D45959