

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.

Filing fee: \$25.00.

FILED EFFECTIVE

2015 AUG 20 AM 10:52

SECRETARY OF STATE  
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction or business is:

C & C Lawn Care Service

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

A Cache Traveller	3275 E Ford Pl	Twin Falls	ID	83301
(Name)	(Address)	(City)	(State)	(Zipcode)

Cooper J Traveller	3275 E Ford Pl	Twin Falls	ID	83301
(Name)	(Address)	(City)	(State)	(Zipcode)

(Name)	(Address)	(City)	(State)	(Zipcode)
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(Name)	(Address)	(City)	(State)	(Zipcode)
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3. The general type of business transacted under the assumed business name is:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Construction  | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Mining                              |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Finance, Insurance, and Real Estate |

4. Mailing address for future correspondence:

C & C Lawn Care

(Name)

3275 E Ford Pl

(Address)

Twin Falls

(City)

ID

(State)

83301

(Zipcode)

5. Name and address for this acknowledgment copy is (if other than # 4):

-same-

(Name)

(Address)

(City) (State) (Zipcode)

Printed Name: A Cache Traveller

Signature: *A Cache Traveller*

Printed Name: Cooper J Traveller

Signature: *Cooper J Traveller*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

08/20/2015 05:00

CK:3134288 CT:172099 BH:1488852

1@ 25.00 = 25.00 ASSUM NAME #2

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