

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 MAR 28 AM 8: 44

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

SECRET RY OF STATE STATE OF IDAHO

Lance's Lawn Care	
The true name(s) and <u>business</u> address(e business under the assumed business na Name Lance Wheeler	· · · · · · · · · · · · · · · · · · ·
The general type of business transacted usiness transacted usiness transacted usiness transacted usiness transacted usiness transacted usiness and transportation with transportation with transportation using usiness transacted usiness trans	on and Public Utilities Submit Certificate of
Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
Lance Wheeler 4524 Moon Lake Drive Meridian ID 83646	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme COPY is (if other than # 4 above):	ent
nature:	Secretary of State use only
nted Name: Lance A Wheeler pacity/Title: Owner	
nature:	IDAHO SECRETARY OF STAT @3/28/2011 @5 CK: 3422 CT: 158010 BH: 12 1 @ 25.00 = 25.00 ASSUM I

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abn.pmd Rev. 07/2010