



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

JUN 28 AM 9:15

FILED EFFECTIVE

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

SPLIT ROCK Landscaping

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Samuel C. James 472 James Rd. Sagie ID
83860

Sandrine V. Bouriquet 472 James Rd. Sagie ID
83860

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

Sam James
SPLIT ROCK Landscaping
P.O. Box 1262 Sandpoint
ID 83864

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

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208-610-6927

Signature: [Signature]
(signature required)

Printed Name: Sam James

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\information forms\sub\p65
Revised 04/2003

IDAHO SECRETARY OF STATE
06/28/2007 05:00
CK: 57066297596 CT: 150010 BH: 1062699
1 @ 25.00 = 25.00 ASSUM NAME # 2

D112842