

Capacity/Title:\_\_

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2016 MAY -9 AN ID: 18

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

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the under business is:     Perfect Lawn + Landscape	rsigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name  Name  Adam Jony Johnson  3. The general type of business transacted under large l	Complete Address  65 North First East Paris 10 83261
COpy is (if other than # 4 above):	
	Secretary of State use only
Signature: Adam Lhnson Capacity/Title: Owner Signature:	IDAHO SECRETARY OF STATE  05/10/2016 05:00  CK:250 CT:158010 BH:1527784  16 25.00 = 25.00 ASSUM NAME #2
Printed Name:	D 186440