

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00.

2017 MAY -5 AM 11:55

SECRETARY OF STATE  
STATE OF IDAHO

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

CPR Lawn Care

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):

Benjamin Bridgewater 1216 N Kimball St, Boise, ID 83704

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

☐ Retail Trade

☐ Construction

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Mining

☒ Services

☐ Manufacturing

☐ Finance, Insurance, and Real Estate

4. Mailing address for future correspondence:

1216 N Kimball Street

Boise, ID 83704

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

Printed Name: Benjamin Bridgewater

Signature: [Signature]

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

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

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE

05/05/2017 05:00

CK:188 CT:158010 BH:1582735

10 25.00 = 25.00 ASSUM NAME #2

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