



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.

FILED EFFECTIVE

2005 APR 19 AM 11:41

SECRETARY OF STATE
STATE OF IDAHO

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

Licano 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

Elijio Licano

7397 S. 45th W.
Idaho Falls, ID

83402

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

- | | |
|--|--|
| ☐ Retail Trade | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Construction |
| ☐ Services | ☐ Agriculture |
| ☐ Manufacturing | ☐ Mining |
| ☐ Finance, Insurance, and Real Estate | |

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

7397 S. 45th W.
IDAHO FALLS, ID
83402

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

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

Phone number (optional):

208 357 1817

Secretary of State use only

Signature: Elijio Licano

Printed Name: Elijio Licano

Capacity: _____

(See instruction # 6 on back of form)

3/20/05 IDAHO SECRETARY OF STATE
 Revised 3/12/05

IDAHO SECRETARY OF STATE
04/19/2005 05:00
CK: 516539 CT: 172899 DH: 885468
1 @ 25.00 = 25.00 ASSUM NAME # 2

D86886