

Signature:____

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Filing fee: \$25.00



2016 MAY 16 AM 10: 06

	Filling fee. \$25.00.			STATE ARY OF
1.	The assumed business name	which the undersign	ned use(s) in the transa	ction of businessiss
	Perfection Pruning & landscaping			
2	The individual and/or entity ha	mae and husiness a	addraes(as) of those do	na hucinoce under
۲.	The individual and/or entity names and business address(es) of those doing business under the assumed business name (do <u>not</u> include the name you listed in #1):			
	Ryle Grinoids	913 Prostoc	1 Ave # 22 1	lwiston, 108330
	(Name)	(Address)		
	(Name)	Address)		
	(Name)	Address)		
3.	The general type of business to Retail Trade Wholesale Trade Services	ransacted under the Construction Agriculture Manufacturing	Transportation	me is: on and Public Utilities urance, and Real Estate
4.	Mailing address for future corrections (Name Grands Fuel 17 (Address) (City) (State	± 22- 83501	5. Name and address copy is (if other than # 4) (Name) (Address)	for this acknowledgment: (State) (Zipcode)
Printed Name: <u>Byle Gyryoth</u> Signature: <u>Byle Gyryoth</u> Printed Name:			IDAHO: 05/1 CK:10744329420 16 25.00 =	of State use only SECRETARY OF STATE 6/2016 05:00 DO CT:158010 BH:152883' 25.00 ASSUM NAME #2
	nted Name:			
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