

Printed Name: Kar

Capacity/Title: Co-Sweer

(see instruction # 8 on back of form)

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.

07 FEB 16 PM 3: 53

Please type or print legibly.

NOTE: See instructions on reverse before filling.

SECRETARY OF STATE STATE OF IDAHO

IDAHO SECRETARY OF STATE

02/20/2007 05:00

CK: 2036 CT: 209833 BH: 1034112

0 25.80 = 25.00 ASSUM MANE # 2

D108346

	ON THE OF IDITIO
1. The assumed business name which the undersigne	ed use(s) in the transaction of
business is:	
Notwe's View Landscaping au	ed Design
2. The true name(s) and business address(es) of the	entity or individual(s) doing
business under the assumed business name:	entity of individual(s) dolling
Name	Complete Address
	E. 900 S., Eden, 10 83325
Arnoldo Mendoza 1720	N. 19th St. Boise, 10 83702
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu	blic Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	
	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Δ	Basement West
ARNIE MENDOZA	PO Box 83720
1720 N. 199 St.	Boise ID 83720-0080
Boise. 10 83702	208 334-2301
B010E, 10 X3102	
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above):	(200) 1811-105)
Vania Paga	2001404-1030
KATIE ROGERSON	. 7.
1239 E. 900 S.	Secretary of State use only
Eden, 1D 83325	
Signature: Allie Gradure required	
Signature: Mied Tracisox 8	
// /signature required)	