CERTIFICATE OF ASSUMED BUSINESS NAMELED (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name CRETARY OF STATE	
The assumed business name which the undersigned use(s) in the transaction of business is: LAWNMOWERMEN	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: One plate Address.	
Name Tracy Lowber 4101	Complete Address 6160000 PLACE Beise, Mahr 53705
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
4. The name and address to which future Phone recorrespondence should be addressed: Tracy Lamber 4101 Glemoe Place Borse, Idaho	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
297	Secretary of State use only
Signature	IDAHO SECRETARY OF STATE 61/05/1999 69:00 CK: 3723 CT: 109075 BH: 175547
Printed Name: Tracy lowber Capacity: (see instruction # 8 on back of form)	1 8 20.00 = 20.00 ASSUM NAME 8 2 $\mathcal{D}2/468$