



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

10 SEP -9 AM 8:18

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
Instructions are included on back of application.

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

THE BOISE LAWN Co.

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

AARON THATCHER

11153 W. Hickory Dale Dr. Boise ID 83713

KATIE THATCHER

11153 W. Hickory Dale Dr. Boise ID 83713

ZACHARY THATCHER

11153 W. Hickory Dale Dr. Boise ID 83713

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

THE BOISE LAWN Co.

11153 W. Hickory Dale Dr.

BOISE ID 83713

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

Signature: [Signature]

Printed Name: AARON THATCHER

Capacity/Title: Partner

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

0141995

IDAHO SECRETARY OF STATE
09/09/2010 05:00
CK: 1039 CT: 251000 BH: 1238191
1 @ 25.00 = 25.00 ASSUM NAME # 2