

CERTIFICATE OF ASSUMED BUSINESS NAME Assumed to Section 53-504, Idaho Code, the undersigned Business Name. Assumed Business Name. Assumed Business Name.

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

NOTE: See instructions on reverse before	a filina	$\mathcal{O}_{\mathcal{A}_{i}^{\prime}_{$
NOTE. OGG MISH GOLIGING OF TOVETSE BEIOT	e mmy.	SIATE DAY DAY TATE
The assumed business name which the und business is: Live Tree	ersigne	" <i>1</i> 0
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name Lisa Martin - Haward I	: 726	entity or individual(s) doing Complete Address Truitdal E Alene, ID 83815
3. The general type of business transacted und	ler the a	ssumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		
4. The name and address to which future correspondence should be addressed: Lisa Hawad Olive Trulfadio 1726 fruitball Courd Alere, ID 83815	tions	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above). BANK OF AMERICA APPLEWAY BRANCH #94503	t	Phone number (optional):
W. 501 Appleway Ocour d'Alene, 10 83814 (208) 667-3537 Signature:	g: 'corp' Vorms labr. p65 Revised 04/2003	Secretary of State use only
Printed Name: Lisa Howard	formstation forms Revised 04/2003	IDAHO SECRETARY OF STATE 96/24/2004 05:00 CK: NO CK # CT: 158010 BH: 752897
Capacity/Title:	rp Vorm Revis	1 8 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	88,55	077590