CERTIFICATE OF ASSUMED (Please type or print legibly. See instr	
To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Cogives notice of adoption of an Assume	ode, the undersigned
The assumed business name which the business is: Weekend Sprinklers	
The true name(s) and business address(business under the assumed business na	ame is/are:
Cesar v. Ochoa	3400 Parkaider Dr. Namea, Id-8368
The general type of business transacted (mark only those that apply)	under the assumed business name is:
Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate Mining (20%)
 The name and address to which future correspondence should be addressed: 	Phone number (optional): 463-1136
Woekend Sprinklops 3400 Parkridge De	Submit Certificate of Assumed Business Name and \$26.00 fee to:
5. Name and address for this acknowledgm copy is (Fother than #4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
	208 334-2301
	Secretary of State use only
mature boar Wohn	Secretary of State are only IDAHO SECRETARY DE STATE
inted Name: Cesar V. Ochoa	Modern 2007

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