



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE
19 AUG 19 AM 9:22
SECRETARY OF STATE
STATE OF IDAHO

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

B & L All Season Yard Maintenance

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

Bill Riley

1008 N. 13th Boise, Id 83702

Lisa Riley

1008 N. 13th Boise Id 83702

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 | |

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

Bill Riley

1008 N 13th

Boise Id 83702

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

208-863-0758

Secretary of State use only

Signature: Bill Riley

(signature required)

Printed Name: Bill Riley

Capacity/Title: owner

(see instruction # 8 on back of form)

g:\corp\forms\abn\abn.pdf Revised 04/2003

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IDAHO SECRETARY OF STATE
08/19/2003 05:00
CK: CASH CT: 150010 BH: 697157
1 @ 25.00 = 25.00 ASSUM NAME # 2